



COUNTY OF SURREY  
BOROUGH OF EPSOM AND EWELL



# Annual Report

of the

**MEDICAL OFFICER OF HEALTH**

and

**SCHOOL MEDICAL OFFICER**

for the Year

**1 9 6 6**

*Incorporating a Report by the Chief  
Public Health Inspector on the work  
of the Health Inspectors throughout  
the year*



# **BOROUGH OF EPSOM AND EWELL**

## **PUBLIC HEALTH COMMITTEE AS CONSTITUTED AT 31st DECEMBER, 1966**

*Chairman* : Alderman W. J. CLARK, F.I.A.S., F.R.S.A., F.R.S.H.

*Vice-Chairman* : Alderman W. J. D. GODSELL

Councillors E. CLARK, Mrs. D. J. FENDER, J. R. GALE, T. G. HOLLAND, C. JOHNSON, L. F. C. MILLER, Mrs. K. PYLE, Mrs. L. D. RINGSDORE, J. M. SALT, R. W. SMITH, J. A. G. WEBB

### **Ex Officio Members**

THE MAYOR (Councillor H. W. DAVISON, J.P., A.C.I.I.)

DEPUTY MAYOR (Councillor L. F. WOOLCOTT)

## **STAFF OF THE HEALTH AND WELFARE DEPARTMENT AT 31st DECEMBER, 1966**

### **Medical Officer of Health**

PATRICK H. R. ANDERSON, B.SC., M.D., D.P.H., D.OBST.R.C.O.G.

### **Assistant Medical Officers**

DAPHNE M. KIRKMAN, M.R.C.S., L.R.C.P., M.B., B.S., D.C.H., D.P.H.

EUSTACE F. HARBEN, M.B., B.S., D.P.H.

### **Dental Officers**

GODFREY ASHWORTH, L.D.S., H.D.D., F.D.S.

MARIE B. EGERTON, L.D.S., R.C.S.

### **Chief Public Health Inspector**

L. H. GRACE, F.R.S.H., M.A.P.H.I.

*(Holds Sanitary Science Certificate of the Royal Society of Health and the Royal Society of Health Certificate as Inspector of Meats and other foods)*

### **Deputy Chief Public Health Inspector**

WM. C. ALDER, A.R.S.H., M.A.P.H.I.

*(Holds the Royal Society of Health Certificate as Inspector of Meats and other foods)*

### **Public Health Inspectors**

W. H. GRAY, M.A.P.H.I.

*(Holds the Royal Society of Health Certificate as Inspector of Smoke and the Royal Society of Health Certificate as Inspector of Meats and other foods)*

M. G. ILLMAN, M.A.P.H.I.

*(Holds the Royal Society of Health Certificate as Inspector of Smoke and the Royal Society of Health Certificate as Inspector of Meats and other foods)*

P. H. FROST, M.A.P.H.I.

*(Holds the Royal Society of Health Certificate as Inspector of Meats and other foods)*

### **Pupil Public Health Inspector**

D. R. JOHNSON

## **Borough Nursing Officer**

Miss J. DORRINGTON, S.R.N., S.C.M., H.V.CERT.

## **Domiciliary Nurses and Midwives**

### *(a) Whole-Time*

Miss K. M. DUNCOMBE, S.R.N., S.C.M., Q.N.

*(Senior Nurse)*

Mrs. D. E. HOUSE, S.R.N.

Mrs. G. MACKAY, S.E.A.N.

Mr. L. C. PRETTY, S.R.N., Q.N.

Miss J. HENDERSON, S.R.N., S.C.M., Q.N.

Mrs. M. M. KEENAN, S.R.N., R.M.N.

Miss J. MILLS, S.R.N., S.C.M., Q.N.

Miss J. F. STEELE, S.R.N., Q.N.

Miss T. WILLIAMS, S.R.N., S.C.M., Q.N.

### *(b) Part-Time*

Mrs. T. E. BENT, S.R.N.

Miss B. M. CORDERY, S.R.N., S.C.M.

Mrs. M. C. JONES, S.R.N.

Mrs. E. BLATCHLEY, S.R.N., S.C.M.

Mrs. M. GIBSON, S.R.N.

Mrs. J. M. PANNELL, S.R.N.

### *(c) Nursing Auxiliary*

Mrs. A. W. WILLIAMS, N.N.C.

## **Health Visitors**

Mrs. C. C. COTTON, S.R.N., S.C.M., H.V.CERT.

Miss J. M. HEADLEY, S.R.N., S.C.M., H.V.CERT.

Miss W. M. EVERS, S.R.N., R.M.N., H.V.CERT.

Mrs. D. A. SHARPE, S.R.N., S.C.M., H.V.CERT.

Miss M. P. TURNER, S.R.N., S.C.M., H.V.CERT.

Mrs. S. E. DONOVAN, S.R.N., S.C.M., H.V.CERT.

Miss J. R. LOWE, S.R.N., S.C.M., H.V.CERT.

Miss F. M. GOLTON, S.R.N., S.C.M., H.V.CERT.

Miss E. H. SPENCER, S.R.N., S.C.M., H.V.CERT.

Mrs. E. Y. WRIGHT, S.R.N., S.C.M., H.V.CERT.

## **Medical Social Worker**

Miss G. M. Wise, A.M.I.A.

## **Home Help Supervisor**

Mrs. D. E. Tapping

## **Mental Welfare Officer**

D. Hodgson

## **Social Worker for Mental Health**

Mrs. M. Fuhr

## **Home Teacher for the Blind**

Miss M. Franklin

## **Welfare Officer to the Deaf**

Miss E. M. Vousden, A.M.W.I.

## **Chiropodists**

### *(a) Whole-Time*

Mrs. A. Dearlove, M.CH.S.

### *(b) Part-Time*

Miss M. B. Warrick, M.CH.S.

Mr. I. C. Taylor, M.CH.S.

## **Physiotherapist**

Mrs. B. Gilbert, M.C.S.P.

## **Social Worker for the Physically Handicapped**

Mrs. M. Cowles, B.SC.(SOC.)

## **Welfare Assistant**

Mrs. M. T. Muil

## **Clerical Staff of the Medical Officer of Health**

*(Administrative Assistant)* R. A. Stay

Mrs. P. A. V. Davies

Mrs. K. F. Dickson

Mrs. G. F. Mitchell

Miss A. Lock

*(Part-time)* Mrs. F. M. Black

R. E. Thorpe, A.R.S.H. *(Senior Clerk)*

Miss T. Longhurst

Miss W. Warwick

Miss L. Wiggan

Miss J. Mansell

Mrs. J. Stout *(Part-time)*

## **Chief Public Health Inspectors' Clerical Staff and Outdoor Staff**

Mrs. J. M. Fuller

Miss D. D. Wood

*(Outside Assistant)* J. I. Stephens

W. J. Jenkins

Mrs. A. Luker

A. Bawden *(Rodent Operative)*

## **Dental Surgery Assistants**

Miss D. M. Jopp

Mrs. J. Holladay

## **Matron of Day Nursery**

Mrs. R. Hyland, S.R.N. *(Waltham House Day Nursery)*

**To the Mayor, Aldermen and Councillors of the Borough of Epsom and Ewell**

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit the Annual Report of the Medical Officer of Health for 1966. The request for this is made in Ministry of Health Circular 1/67 in which there is reference to Regulations 5(3) and 15(5) of the Public Health Officers Regulations 1959. The report is in a form which meets the requirements of the Ministry as summarised in the letter.

The Registrar General's estimated population was 72,150, an increase of 170 on 1965. The number of deaths from all causes rose from 1,083 to 1,104 giving a crude death rate of 15.3 compared with 15 in 1965. The recent gradual rise in the birth rate has been maintained. The live birth rate was 13.5 compared with 13 in the previous year.

The standard of general health was good. There is no epidemic disease to report other than an outbreak of Sonne Dysentery in the late Autumn. This concerned the two Ewell Primary Schools and the outbreak was rapidly brought under control with the co-operation of teachers and parents in a strict antiseptic regime within the schools.

In my previous Report I had drawn attention to the recurring bi-ennial epidemics of measles and 1966 was one of the "between" years. Notifications were 99 compared with 825 in 1965. The Medical Research Council's field trials have proved that the newly introduced measles vaccines are safe and give at least 85 per cent. protection. These vaccines are now freely available to every family doctor. Soon we may look forward to offering general immunisation against measles through our Clinic Services and so to an eradication, within a measureable period of time, of this highly infectious disease.

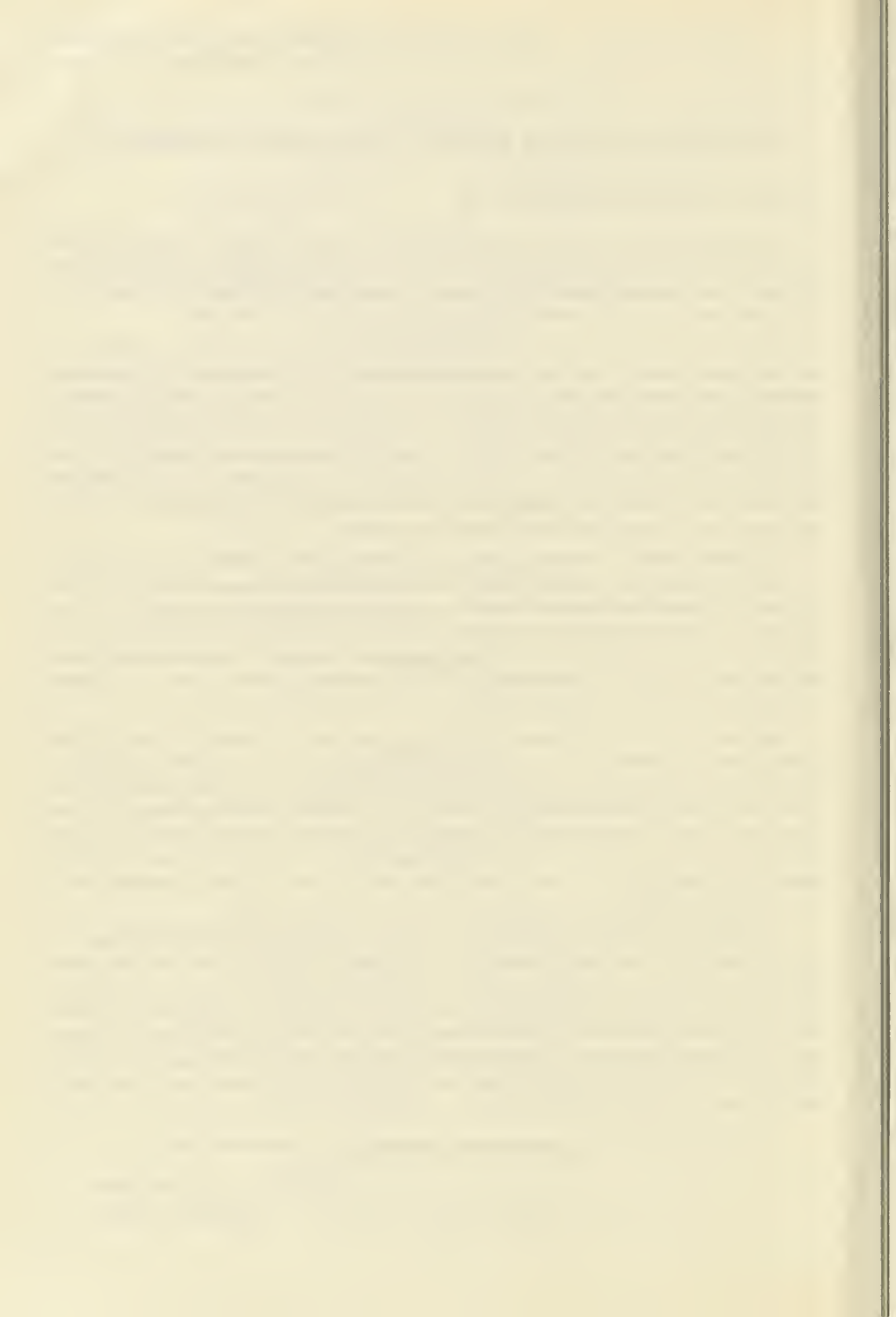
Last year I stressed the importance of maintaining and improving health by means of health education and by screening tests. The Health Screening Clinic held at Epsom in September attracted big attendances and women were particularly interested in the cervical smear test. I have given some details of the Clinic in the body of this Report. It was unfortunate that, due to the overwhelming response and to the shortage of laboratory technicians, reports on cervical smears were necessarily delayed. Because the present trend is for earlier marriage, and child-bearing at an earlier age, the cervical smear service must be made available to younger women who have borne children.

I would like to acknowledge the active support and encouragement I have had from Members of the Public Health Committee. I offer my grateful thanks to Mr. L. H. Grace, the Chief Public Health Inspector for his comprehensive report on the work of the Health Inspectors throughout the year. My colleagues in other departments have given me their ready co-operation. My thanks are due to the medical, nursing, social and welfare field staff for their hard work and loyalty. Lastly, I am indeed indebted to my Administrative Assistant, Mr. R. A. Stay, and to his clerical staff for their cheerfulness and valuable assistance without which the compilation of this Report could not have been undertaken.

I am, Mr. Mayor, Aldermen and Councillors, Your obedient Servant,

*PATRICK H. R. ANDERSON*  
*Medical Officer of Health*





**PART ONE**

**GENERAL**

**AND**

**STATISTICAL**

# ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1966

## VITAL STATISTICS FOR THE YEAR

Area (acres) . . . . .	8,427
Population (Census 1961) . . . . .	71,159
Population (estimated mid-year 1966) . . . . .	72,150
Density (persons per acre) . . . . .	8.56
Number of inhabited houses at 31.12.66 . . . . .	21,814
Rateable value at 31.12.66 . . . . .	£3,904,656
Product of Penny Rate . . . . .	£15,891

<b>Live Births</b>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate . . . . .	458	445	903
Illegitimate . . . . .	38	35	73
	<hr/> 496	<hr/> 480	<hr/> 976

Live birth rate per 1,000 population . . . . .	13.5
Standardised birth rate . . . . .	15.2
Illegitimate live births per cent of total live births . . . . .	7.5

<b>Still Births</b>			
Legitimate . . . . .	5	10	15
Illegitimate . . . . .	—	1	1
	<hr/> 5	<hr/> 11	<hr/> 16

Still birth rate per 1,000 live and still births . . . . .	16.0
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<b>Deaths</b>	<i>Male</i>	<i>Female</i>	<i>Total</i>
Private Residents . . . . .			725
Patients in Mental Hospitals . . . . .			379
	<hr/> 507	<hr/> 597	<hr/> 1,104

Crude death rate . . . . .	15.3
Standardised death rate . . . . .	9.48

<b>Deaths of Infants under 1 year of age</b>	<i>Male</i>	<i>Female</i>	<i>Total</i>
Legitimate . . . . .	11	8	19
Illegitimate . . . . .	—	—	—
	<hr/> 11	<hr/> 8	<hr/> 19

<i>Infant mortality rate per 1,000 live births :</i> Total . . . . .	19.5
Legitimate . . . . .	21.0
Illegitimate . . . . .	—

### Deaths of Infants under 1 year of age

#### *Neonatal Mortality*

Number of deaths of infants under 4 weeks of age . . . . .	14
Neonatal mortality rate per 1,000 live births . . . . .	14.4

#### *Early Neonatal Mortality*

Number of deaths of infants under 1 week of age . . . . .	14
Early neonatal mortality rate per 1,000 live births . . . . .	14.4

#### *Perinatal Mortality*

Still births and deaths under 1 week per 1,000 live births . . . . .	30.7
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### Maternal Mortality

Maternal deaths (including abortions) . . . . .	Nil
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## POPULATION

The Registrar General's estimate of population for 1966 was 72,150 and this figure has been used for statistical purposes in the preparation of this report. The estimate is 170 higher than in the previous year.

The number of deaths exceeds the number of live births by 128. This apparently high proportion of deaths is in part accounted for by the large number of elderly patients in the five mental hospitals in the Borough. The number of occupied beds in the mental hospitals was 6,595 compared with 6,551 in 1965.

### Births

Live births totalled 976 representing a birth rate of 13.5 per thousand population. The Registrar General, by providing a comparability factor (1.13 for Epsom), makes adjustments in respect of each area having regard to variations in age and sex distribution of population and the influence on the birth rate of the large institutions in this district. By applying the comparability factor to the crude birth rate the standardised birth rate of 15.2 is obtained compared with the figure of 17.7 for England and Wales in 1966.

### Deaths

The number of deaths assigned by the Registrar General was 1,104 compared with 1,083 in 1965. Of this total 379 occurred in the local mental hospitals in patients whose stay exceeded six months. Where death occurred within six months of admission the death was assigned to the district from which the patient had come. The crude death rate was 15.3 per 1,000 total resident population. By applying the Registrar General's comparability factor, 0.62 to the crude death rate a standardised death rate of 9.48 is obtained compared with the figure of 11.7 for England and Wales in 1966.

#### *Causes of Death*

The causes of death are classified in Table III, the total deaths amounting to 1,104. The commonest killer is disease of the heart and blood vessels (514), respiratory diseases especially bronchitis and pneumonia particularly in the elderly take second place (230), whilst malignant disease as the third major cause takes an ever increasing toll.

#### *Accidental Deaths*

Road accidents involving motor vehicles accounted for 5 deaths—6 less than in 1965.

#### *Accidents other than Road Accidents*

Of these 12 deaths, 3 were due to falls in elderly persons, 3 to suffocation due to inhalation of food in mental hospital patients, 2 to carbon monoxide poisoning, 2 to drowning, one to barbiturates and the last in a 6-weeks old infant, who was suffocated by bedclothes when the cot overturned.

#### *Suicide*

Perhaps the sharp fall in the number of suicides from 16 to 6 may in part be due to the humanitarian work of social agencies such as the Samaritans. The sex distribution was equal and most of the deaths were in elderly people.

#### *Infant Mortality*

The infant mortality rate (i.e. deaths of infants under one year per 1,000 live births) was 19.5 for the Borough compared with 19 for England and Wales. Again it is clear that if the infant survives the first month of life, his chances of living through the next eleven months are greatly improved, e.g. 14 deaths occurred during the first 4 weeks while only 5 occurred during the next 11 months. Of the 14, prematurity accounted for 7, broncho-pneumonia 3, rhesus haemolytic disease 2, and congenital malformations 2. Of the 5 which occurred after the first month of life, 3 were due to infection, one to congenital malformation and one to accidental suffocation.

#### *Maternal Mortality*

There were no maternal deaths in 1966.

TABLE I

COMPARATIVE BIRTH, DEATH AND MATERNAL MORTALITY RATES, AND  
INCIDENCE RATES OF INFECTIOUS DISEASE FOR THE YEARS 1965 AND 1966

<i>Rates per 1,000 Population</i>	1965	1966
<b>Births</b>		
Live birth rate (crude) . . . . .	13.0	13.5
<b>Deaths</b>		
All causes (crude) . . . . .	15.0	15.3
Typhoid and Paratyphoid . . . . .	—	—
Whooping Cough . . . . .	—	—
Diphtheria . . . . .	—	—
Tuberculosis . . . . .	0.03	0.04
Influenza . . . . .	0.01	0.18
Smallpox . . . . .	—	—
Poliomyelitis . . . . .	—	—
Pneumonia . . . . .	1.96	2.2
Measles . . . . .	—	—
<b>Incidence of Infectious Diseases</b>		
Typhoid . . . . .	0.01	—
Paratyphoid . . . . .	—	—
Meningococcal Infections . . . . .	—	—
Scarlet Fever . . . . .	0.44	0.19
Whooping Cough . . . . .	0.18	0.01
Diphtheria . . . . .	—	—
Erysipelas . . . . .	0.04	0.07
Smallpox . . . . .	—	—
Measles . . . . .	11.40	1.38
Pneumonia . . . . .	0.14	0.03
Poliomyelitis : Paralytic . . . . .	—	—
Non-Paralytic . . . . .	—	—
Food Poisoning . . . . .	0.18	0.24
Dysentery . . . . .	0.28	1.96
Tuberculosis : Respiratory . . . . .	0.17	0.28
Non-Respiratory . . . . .	0.04	0.03
Puerperal Pyrexia . . . . .	0.01	—
<b>Infant Mortality</b>		
<i>Rates per 1,000 Live Births</i>		
Under 1 year of age . . . . .	15.0	19.5
Under 4 weeks of age (neonatal) . . . . .	11.8	14.4
Under 1 week of age (early neonatal) . . . . .	10.7	14.4
<i>Rates per 1,000 Total (Live and Still) Births</i>		
Still Births . . . . .	10.6	16.5
Perinatal Mortality . . . . .	21.4	30.7

**TABLE II**  
COMPARATIVE BIRTH, DEATH AND MORTALITY RATES 1881-1966

	BIRTH RATE PER 1,000 POPULATION		DEATH RATE PER 1,000 POPULATION*		MORTALITY RATES PER 1,000 LIVE BIRTHS OF CHILDREN UNDER ONE YEAR OF AGE	
	<i>England and Wales</i>	<i>Epsom and Ewell</i>	<i>England and Wales</i>	<i>Epsom and Ewell</i>	<i>England and Wales</i>	<i>Epsom and Ewell</i>
1881 - 1890	32.4	26.2	19.1	14.5	142.0	107.0
1891 - 1900	29.9	22.9	18.2	13.7	153.0	121.0
1901 - 1910	27.2	24.9	15.4	11.7	128.0	93.0
1911 - 1920	21.8	18.2	14.3	11.5	100.0	71.0
1921 - 1930	18.3	16.1	12.1	9.8	72.0	49.0
1931 - 1940	14.9	12.6	12.3	7.3	58.0	41.0
1941 - 1950	16.9	14.2	12.3	9.4	43.1	28.4
1951 - 1960	15.8	10.4	11.6	15.0	24.8	19.1
1961	17.4	11.4 (13.6)	12.0	14.0 (9.5)	21.6	23.8 (19) <i>deaths</i>
1962	18.0	12.5 (14.7)	11.9	15.4 (10.2)	21.6	13.7 (12) <i>deaths</i>
1963	18.2	12.6 (14.2)	12.2	15.8 (9.9)	20.9	27.0 (24) <i>deaths</i>
1964	18.4	12.8 (14.5)	11.3	14.7 (9.3)	20.2	18.5 (17) <i>deaths</i>
1965	18.1	13.0 (14.7)	11.5	15.0 (9.45)	19.0	15.0 (14) <i>deaths</i>
1966	17.7	13.5 (15.2)	11.7	15.3 (9.48)	19.0	19.5 (19) <i>deaths</i>

\* *Deaths of patients in mental hospitals included from 1953. From 1956 the standardised death rate allows for the high mortality in residential institutions, such as hospitals for mental illness.  
(Bracketed figures represent standardised rates)*

**TABLE III**  
CAUSES OF DEATH IN THE BOROUGH OF EPSOM AND EWELL

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Tuberculosis, respiratory . . . . .	2	1	3
Syphilitic Disease . . . . .	2	3	5
Other Infective and Parasitic Disease . . . . .	—	3	3
Malignant neoplasm, stomach . . . . .	15	9	24
Malignant neoplasm, lung, bronchus . . . . .	39	14	53
Malignant neoplasm, breast . . . . .	—	12	12
Other malignant and lymphatic neoplasms . . . . .	43	57	100
Leukaemia, Aleukaemia . . . . .	3	2	5
Diabetes . . . . .	1	3	4
Vascular lesions of nervous system . . . . .	41	70	111
Coronary disease, angina . . . . .	113	64	177
Hypertension with heart disease . . . . .	4	7	11
Other heart disease . . . . .	38	100	138
Other circulatory disease . . . . .	29	48	77
Influenza . . . . .	7	6	13
Pneumonia . . . . .	58	102	160
Bronchitis . . . . .	35	12	47
Other disease of respiratory system . . . . .	7	3	10
Ulcer of stomach and duodenum . . . . .	3	2	5
Gastritis, Enteritis and Diarrhoea . . . . .	1	2	3
Nephritis and Nephrosis . . . . .	2	4	6
Hyperplasia of prostate . . . . .	6	—	6
Congenital malformations . . . . .	3	4	7
Other defined and ill-defined diseases . . . . .	44	57	101
Motor vehicle accidents . . . . .	3	2	5
All other accidents . . . . .	5	7	12
Suicide . . . . .	3	3	6
Total	507	597	1,104



## SERVICES UNDER THE PUBLIC HEALTH ACTS

### Water Supply

The source of the Borough's water supply remains unchanged. Epsom, including the local hospitals, is supplied from the deep chalk wells of the Council's undertaking in East Street. It is the routine practice for the Borough Water Engineer to send weekly samples of raw water to the County's Public Health Laboratories in London. Reports up to mid-June were satisfactory. A sample reported on for 15th June was: "This degree of impurity (5 Bact. coli per 100 ml.) is unusual for this source." From this date on to the end of the year the Public Health Inspectors submitted 126 samples of raw water from this source to the Public Health Laboratory in Epsom. Of these 26 were unsatisfactory due to the presence of Bact. coli (Type I) which contamination occurred as expected more often in the summer months. Ewell is supplied mainly from the Sutton District Water Company's chalk wells in Carshalton Road, Sutton, and in Woodmansterne. Samples of raw water were taken on 6 days weekly and examined by the Company's chemist and bacteriologist and in addition monthly samples were submitted to the County's Public Health Laboratories. A part of the Borough in the Stoneleigh and Worcester Park area (population 7,000) is supplied by the Metropolitan Water Board (River Thames). The quality control at the Water Board's Laboratories was carried out by means of daily sampling and 99.88 per cent. samples of treated water were negative for Bact. coli (Type I). Part of West Park Hospital supply, about 50,000 gallons per day, is pumped from a deep well on the site—47 samples of raw water from the well proved satisfactory.

Chlorination of all raw water was carried out before it was put into supply. Of 327 samples of tap water going into supply all gave a satisfactory report.

The chemical analyses of the water from the Borough's undertaking and from the Sutton District Water Company were reported on at regular intervals and below are given typical results

	<i>Epsom and Ewell Corporation</i>	<i>Sutton District Water Company</i>
Appearance . . . . .	Bright and Clear	Bright with a slight white deposit of minute particles of calcium carbonate
Colour . . . . .	Pale Blue	Nil
Odour . . . . .	Nil	Nil
pH . . . . .	7.3	8.1
Electric Conductivity . . . . .	400	280
Dissolved solids dried at 180°C. . . . .	285	210
Chlorine as Chloride . . . . .	20	21
Free Carbon Dioxide . . . . .		Trace
Alkalinity as Calcium Carbonate. . . . .	140	65
Hardness: Total . . . . .	212	120
Carbonate . . . . .	140	65
Non-Carbonate . . . . .	72	55
Nitrate Nitrogen . . . . .	8.9	10
Nitrite Nitrogen . . . . .	0.01	Less than 0.01
Ammoniacal Nitrogen . . . . .	0.00	0.15
Oxygen absorbed . . . . .	0.16	0.10
Albuminoid Nitrogen . . . . .	0.00	0.00
Residual Chlorine . . . . .	Absent	0.25
Metals: Iron . . . . .	Absent	Absent
Zinc . . . . .	Absent	Absent
Copper . . . . .	Absent	Absent
Lead . . . . .	Absent	Absent

The fluoride content in the Sutton District Water supply was reported to be 0.1 part per million or less, in the Thames water 0.2 parts per million and to be not more than a trace in the Epsom Wells supply. No serious shortage of water was reported throughout the year. Every house in the built-up areas in the Borough is supplied direct from the Mains. One house isolated in the middle of a wood, was dependent on rain water storage. The occupants of 60 caravans were supplied from stand-pipes and 4 were on domestic supply.

### Sewage and Sewage Disposal

The sewage from the Borough is piped to the disposal works administered by the Hogsmill Valley Joint Sewage Board in the London Borough of Kingston-upon-Thames. This arrangement works satisfactorily and prevents any untreated sewage effluent being discharged into local streams.

**Cesspools**

There were 47 cesspools in the Borough. Pail closets were in use at 60 caravans and at 9 other premises.

**Public Cleansing**

The Borough Engineer and Surveyor controls the organisation of Public Cleansing. Refuse, both household and trade, was collected weekly and disposed of at the Council's tip off East Street. The maceration plant on Longmead is nearly under way which means that soon there will be no need to make use of the present tip.

**Caravan Site, West Ewell**

During the year good progress was made to provide the caravan dwellers (50-60 families) with the minimum standard of comfort and hygiene :

- (1) the site has been drained ;
- (2) hard standings and footpaths have been laid down ;
- (3) water points have been increased ;
- (4) work is in hand for the construction of a sanitary block to include water closets, hot showers and laundry facilities ; and for the installation of an electricity sub-station to provide an independent supply for each van.

Families welcome these improvements which to say the least serve as a practical demonstration of health education. The Council are aware that for families with young children, the one planning requirement more important than any other, is the provision of a play area in the fresh air within easy call of mother. Soon this playground will become a reality.

**Swimming Baths and Pools**

The Municipal Baths were open from April to October. The total attendances were 138,963. The water supplied from piped mains was subjected to continuous filtration and chlorination throughout the season—23 samples were examined bacteriologically and all were satisfactory. There is one privately owned open air swimming pool in the Borough open to the general public and one open-air pool owned by a large Club. Both pools are equipped with chlorination plants. Of 6 samples reported on, all but one were satisfactory. The 3 school bathing pools in the Borough were kept under supervision and were maintained in a satisfactory state of cleanliness.

**Epsom Downs**

The Council, recognising the risk of water pollution in the gathering ground of the local water undertakings, and the Public Health nuisance resulting from the inevitable widespread fouling of the area, have agreed with the Epsom Grandstand Association that they (the Council) will provide on the Downs a permanent sanitary convenience open to the Public all the year round, and connected to the existing sewer. Building plans await approval and construction should commence when the details have been finally agreed.

**Sanitary Inspection of the Area**

The work carried out by the Health Inspectors on the sanitary supervision of the District is detailed in the Report of the Chief Public Health Inspector.

**Housing**

The provision of an adequate number of houses of good standard remains priority number one. The Council's building programme on Longmead and Ruxley Farm is well advanced. I am indebted to the Borough Engineer for information about the number of new dwellings erected during the year.

Erected by the Local Authority . . . . .	106
Erected by private enterprise . . . . .	239

At the end of the year 802 applicants were on the Council's waiting list for re-housing.

A large and important part of the Health Inspector's work is connected with housing for he is responsible for assessing the state of existing houses and, where he considers repair economic, for recommending action to bring such houses into a sound state of repair.

**Improvement of Houses**

Under the Housing Act 1964, Local Authorities may require the provision of standard amenities in tenanted dwellings. Since the Act came into operation the Public Health Inspectors have made recommendations in respect of two improvement areas involving a total of 41 dwellings.

The scope of the Health Inspector's work dealing with housing is detailed in the Chief Public Health Inspector's Report.



Slum Clearance

At least 150 dwellings throughout the Borough are or will shortly be unfit and beyond repair at a reasonable cost. During the year 7 dwellings were presented as unfit under Section 16 of the Housing Act, 1957, and 10 families from slum clearance dwellings were re-housed. Because of the long general waiting list for re-housing, only a small proportion of Council Houses are available for the re-housing of families displaced under Slum Clearance.

Clean Air Act 1956

The Chief Public Health Inspector is able to report a gradual reduction in air pollution by smoke as measured at the two Smoke and Sulphur Dioxide recording stations at Stoneleigh and Epsom which serve as part of the National Survey of Air Pollution. Pollution of Air by Smoke could be almost eliminated if householders ceased to burn coal in open fires. Within the next decade we are likely to see a marked reduction in the domestic consumption of bituminous coal, a corresponding increase in the consumption of oil, trebling of the amount of electricity generated at the Nuclear Power Stations, and a doubling of the amount of gas used, with much less made from coal, and a substantial proportion as natural gas. All these changes will reduce air pollution by Smoke. Experts consider that the amount of Sulphur Dioxide discharged into the air will not be greater in ten years time than it is at present.

Mortuary Accommodation

Epsom District Hospital continues to provide mortuary and post-mortem facilities to meet the requirements of the Borough. The Council Mortuary is maintained ready for use if necessary.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES  
Notifiable Infectious Diseases

Table 1 includes death rates and incidence rates of the notifiable infectious diseases, with the figures for the previous year for comparison. Table IV shows the number of cases of infectious diseases notified during 1966. Table V shows the incidence of notifiable infectious diseases classified according to age and sex, with the exception of tuberculosis which is dealt with in Tables VI and VII.

Smallpox

No cases reported during the year.

Vaccination against Smallpox

Vaccination is available through the family doctor and at clinics throughout the Borough. During the year 701 vaccinations were notified representing 569 primary and 132 re-vaccinations. Family doctors carried out 195 vaccinations and 506 were done at clinics. At the end of 1966, 539 infants up to the age of 2 years had been vaccinated, representing an acceptance rate of approximately 58 per cent. Again this low acceptance rate is disturbing.

Until national policy insists in all cases on a valid International Certificate of Vaccination, there is an ever present risk of the disease being introduced into this country as air travel becomes more and more popular. Again I would emphasise that re-vaccination is more effective and that the risks are minimal when primary vaccination has been accepted in early life (the optimum time is between the first and second birthdays).

Diphtheria

I am pleased to report that again no case has been notified in the Borough since 1954. This freedom from diphtheria we owe to protective inoculation the success of which depends on a high acceptance rate. Protective immunisation during the first six months of life is available through the family doctor or at the clinic and reinforcing doses are offered during the second year, at school entry and again at 8 years. I am pleased to report that the acceptance rate for primary inoculation was approximately 82 per cent. and for reinoculation 55 per cent.

Immunisation Procedures Carried Out

Inoculations	Carried out by General Practitioners	Carried out at Schools and Clinics
Primary		
Triple (Diphtheria, Whooping Cough and Tetanus) .	151	647
Combined (Diphtheria and Tetanus) . . . . .	1	4
Tetanus only . . . . .	15	23
Reinforcing		
Triple (Diphtheria, Whooping Cough and Tetanus) .	111	406
Combined (Diphtheria and Tetanus) . . . . .	74	1,056
Tetanus only . . . . .	11	1



### **Acute Poliomyelitis**

No case of paralytic poliomyelitis has been reported in the Borough for the past 6 years. In this country this crippling disease has been controlled by the universal acceptance of an effective and safe oral vaccine.

Primary immunising procedure was carried out in 810 persons under 16 years of age ; 845 persons received reinforcing doses.

### **Typhoid Fever**

No cases were reported during the year.

### **Paratyphoid Fever**

No cases were reported during the year.

### **Food Poisoning**

Seventeen cases of food poisoning were reported compared with 13 in 1965. From seven cases *S. typhi-murium* was recovered, *S. stanley* from five cases, *S. panama* from one, *S. st. paul* from one, *S. jukestawn* from one and *staph. aureus* from two.

### **Dysentery**

During the year 128 cases of Sonne Dysentery and 13 of Flexner were notified, 12 of the latter occurred in mental hospital patients. Because Sonne Dysentery is endemic in this country, we expect an outbreak from time to time. Young children are mainly affected and, once introduced, the infection quickly spreads through the medium of infected hands in *nurseries and in primary schools*. Towards the end of the year an outbreak occurred affecting 49 families with children attending the two Ewell Primary Schools. All pupils suffering from diarrhoea were excluded and re-admitted only when the family doctor considered them fit. School closure as a means of control of the infection is not recommended because children then play in each other's homes and outside and so the infection tends to spread. The surest way of controlling such an outbreak is the introduction of strict hygienic measures in school, including hand-washing and rinsing with a potent disinfectant. With the co-operation of school staff and parents the outbreak was quickly over.

### **Scarlet Fever**

During recent years scarlet fever has been a mild disease with few serious complications—14 cases were notified compared with 32 in 1965. The incidence rate per 1,000 population was 0.19.

### **Measles**

We expect an epidemic of measles in this country every second year ; 1966 was one of the "between" years and only 99 cases were reported compared with 825 in 1965. During the past two years the control of measles has been much in the limelight both with the Medical Research Council and with the Ministry of Health. Thanks to the work of the former, vaccines are now available which afford a high degree of protection and are harmless to the child. Such vaccines are available through the National Health Service to Doctors who may wish to use them for any of their patients. When conclusive reports on field trials satisfy the Ministry of Health, they will recommend the general use of measles vaccines in the routine immunisation of children. Medical experts in this country and abroad hope for the eradication of this disease within a measurable period of time. During the first half of the year, 27 children at Waltham House Day Nursery were inoculated with measles-killed vaccine followed by a second injection with attenuated vaccine a month later. There were no untoward effects and no cases of measles were reported from the Nursery during the year.

### **Whooping Cough**

Due largely to the protective inoculation now widely accepted by parents for their children, whooping cough is a mild disease with few complications. One case of whooping cough was notified, compared with 13 in 1965.

During the year the names of 44 persons were added to the tuberculosis register, and 49 were removed. Details of these alterations are as follows :—

*Additions to Register*

Primary notifications relating to private residents already residing in this district . . . . .	15
Primary notifications of persons residing in Institutions :	
(a) already resident . . . . .	7
(b) on admission . . . . .	Nil
Transfer of private residents notified in other areas, now residing in this district . . . . .	12
Transfer of persons notified in other areas now residing in institutions in this district . . . . .	10
Reinstated . . . . .	Nil
	<hr/> 44

*Removals from Register*

By removals to other districts :	
(a) Private residents . . . . .	11
(b) Patients in mental institutions . . . . .	5
By recovery :	
(a) Private residents . . . . .	23
(b) Patients in mental institutions . . . . .	Nil
By death :	
(a) Private residents . . . . .	5
(b) Patients in mental institutions . . . . .	5
	<hr/> 49

Of the 10 names removed from the register because of death two were certified as due to tuberculosis.

At the end of the year the number of names on the register totalled 339 distributed as follows:

	<i>Respiratory</i>		<i>Non-Respiratory</i>	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>
In private residences . . . . .	130	78	11	18
In Institutions . . . . .	85	11	4	2
	<hr/> 215	<hr/> 89	<hr/> 15	<hr/> 20

*Notifications of Tuberculosis*

Twenty-two notifications were received from medical practitioners of persons certified, so far as is known for the first time, to be suffering from tuberculosis. In Table VI these cases are classified by sex and age and sub-divided into pulmonary and non-pulmonary types of disease. In Table VII the number of notifications received in previous years is given for purposes of comparison.

*Extra Nourishment*

Provision of special nourishment in the form of milk was granted to 16 selected cases for varying periods during the year and 13 cases were in receipt of extra nourishment at the end of the year.

*B.C.G. Vaccination against Tuberculosis*

This protection is available at Chest Clinics to close contacts who are Mantoux negative and to children who are approaching school leaving age. Consent forms were sent to parents of school-leavers. There was a high acceptance rate and the results are shown below :

Number of children offered treatment . . . . .	740
Number consenting . . . . .	549 (equivalent to 74.2%)
Number Mantoux positive . . . . .	14 (equivalent to 2.5%)
Number of children vaccinated . . . . .	507 (equivalent to 68.5%)

83 pupils at Epsom College were given B.C.G. vaccination and 24 children who missed vaccination in previous years.

*Mass Radiography Service*

Eighty pupils were examined when this service visited Epsom College and 100 employees when the Unit visited an Industrial Establishment. No case of active pulmonary tuberculosis was detected. 3,930 members of the public were examined at the Health Screening Clinic in September—32 chest abnormalities (including one neoplasm and one active pulmonary tuberculosis) were referred to family doctors for further investigation and treatment.

*Public Health Laboratory Service*

Bacteriological investigations were carried out by the Public Health Laboratory, West Park Hospital, Epsom, under the direction of Dr. D. R. Gamble, to whom grateful acknowledgement is made. Specimens may be submitted by doctors, veterinarians, dentists, persons acting on behalf of medical officers of health, such as health inspectors and health visitors, or by representatives of

official bodies. Specimens cannot be accepted from private persons. The routine specimens examined fall under two main headings :—

- (a) medical specimens ;
- (b) sanitary specimens from local or food authorities or, by arrangement, from commercial undertakings.

## SERVICES UNDER THE FOOD AND DRUGS ACT, 1955

### (a) Milk Supplies

Practically the whole of the milk distributed within the Borough was heat treated. Some raw (farm bottled) milk (10,000 pints) from a producer in Kent was sold by one registered distributor. The Epsom Public Health Laboratory reported favourably on 100 samples of heat-treated milk and one sample of untreated milk (bottled).

		<i>Methylene Blue Reduction Test</i>	<i>Phosphatase Test</i>	<i>Turbidity Test</i>	<i>Colony Count</i>
		SATISFACTORY	SATISFACTORY	SATISFACTORY	SATISFACTORY
Untreated . . .	1	1	—	—	—
Pasteurised . . .	90	90	90	—	—
Sterilised . . .	8	—	—	8	—
Ultra-heat treated	1	—	—	—	1
Separated . . .	1	—	—	1	—

The Phosphatase Test measures the efficiency of pasteurisation. The Methylene Blue Reduction Test indicates keeping quality and cleanliness and the Turbidity Test provides an efficient test on sterilisation.

The former Manager of the South West Regional Hospital Board Dairy Farm at Horton Hospital has now become the Board's Tenant and is building up a herd of dairy stock. Present production is approximately 75 gallons daily. No untreated milk is sold and the bulk of the milk is sent daily to the Milk Marketing Board for treatment at a pasteurising plant in Streatham. Five samples of raw milk from Horton Farm were submitted to Epsom Public Health Laboratory and no sample showed any evidence of *Brucella Abortus* or of *Tubercle Bacilli* after animal inoculation.

### (b) Ice Cream

Firms of national repute supply the great bulk of ice-cream retailed in the Borough and nearly all their samples were bacteriologically safe. The consumption of soft ice-cream, prepared in the Borough, continues to give rise to anxiety because of the unsatisfactory bacteriological reports.

Laboratory report on sampling was as under (Methylene Blue Reduction Test):—

Grade I	63
Grade II	21
Grade III	24
Grade IV	24
	<hr/> 132

Grades I and II may be regarded as satisfactory.

Twenty-six of the unsatisfactory samples came from a vendor whose product was reconstituted from a bacteriologically safe heat-treated mix supplied by a firm of national repute. The contamination of this ice-cream must therefore have resulted from dirty handling of equipment on the vehicles from which the final product is retailed. In spite of frequent visits and advice from the Health Inspectors and communication with the parent company, there is little improvement to report.

Ten of the unsatisfactory samples came from an ice-cream factory registered within the Borough. The factory changed hands during the year, the new owner has co-operated with the Health Inspectors, and on their advice has installed modern equipment. Recent laboratory reports on the ice-cream prove a higher standard of cleanliness both in handling and in sterilisation of equipment.



**(c) Liquid Egg (Pasteurisation) Regulations 1963**

There are no egg pasteurisation plants within the Borough.

**(d) Food Hygiene (General) Regulations 1960**

The Ministry lay down that hand-washing should be carried out in a wash-hand basin provided for the purpose and **not** at the sink used for the cleansing of open food and equipment. Hence the importance of separate wash-hand basins.

I am indebted to the Chief Public Health Inspector for the information given in the Table below. All the food premises inspected (412) complied both with Regulation 16 (wash-hand basin) and Regulation 19 (sinks for washing open food and equipment). All these premises had a supply of hot and cold water.

The number of food premises in the Borough, grouped in categories of trade are listed below :—

<i>Category</i>	<i>No. of Premises</i>	<i>No. of premises complying with Regulation 16 (wash-hand basins)</i>	<i>Premises to which Regulation 19 applies. Facilities for washing food and equipment</i>	<i>Premises complying with Regulation 19</i>
Bakehouses and Bakers' Shops	19	19	19	19
Butchers . . . . .	31	31	31	31
Cafes . . . . .	35	35	35	35
Clubs . . . . .	10	10	10	10
Confectioners . . . . .	64	64	64	64
Dairies and Milk Depots . . . . .	3	3	3	3
Fishmongers and Fried Fish Shops	17	17	17	17
Greengrocers (Wholesale and Retail)	35	35	35	35
Grocers (Wholesale and Retail)	77	77	77	77
Kitchens :—				
Factory . . . . .	6	6	6	6
Hotel . . . . .	8	8	8	8
Hospital & Nursing Home	9	9	9	9
School—Public . . . . .	18	18	18	18
School—Private . . . . .	9	9	9	9
Multiple Food Stores (Supermarkets)	8	8	8	8
Public Houses & Off-Licences	63	63	63	63
Total	412	412	412	412

**(e) Inspection and Supervision of Food**

The wide field covered by the work of the Health Inspectors is detailed in the Report by the Chief Public Health Inspector.

**(f) Poultry Inspection**

There are no poultry processing premises within the district.

**Inspection under The Factories Act 1961**

Within the Borough the Public Health Inspectors carried out 131 inspections on 141 registered premises and seven written notices were served. The seven defects found concerned unsuitable or defective sanitary conveniences, four of which had been remedied by the end of the year.

**TABLE IV**  
NOTIFICATION OF INFECTIOUS DISEASES

	<i>Notifications of Diseases occurring in Private Houses</i>	<i>Notifications of Diseases occurring in Hospital</i>	<i>Total</i>
Typhoid . . . . .	—	—	—
Paratyphoid . . . . .	—	—	—
Meningococcal Infections . . . . .	—	—	—
Scarlet Fever . . . . .	14	—	14
Whooping Cough . . . . .	1	—	1
Diphtheria . . . . .	—	—	—
Erysipelas . . . . .	1	4	5
Smallpox . . . . .	—	—	—
Measles . . . . .	99	—	99
Pneumonia . . . . .	2	—	2
Poliomyelitis : Paralytic . . . . .	—	—	—
Non-Paralytic . . . . .	—	—	—
Food Poisoning . . . . .	17	—	17
Dysentery . . . . .	129	12	141
Malaria : Contracted abroad . . . . .	—	—	—
Indigenous . . . . .	—	—	—
Tuberculosis : Respiratory . . . . .	13	7	20
Non-Respiratory . . . . .	2	—	2
Puerperal Pyrexia . . . . .	—	—	—

[see over for Table V]

**TABLE VI**  
NOTIFICATION OF TUBERCULOSIS BY AGE AND SEX

Year	Private Residents				Mental Hospital Patients				Total	
	Pulmonary M	F	Non-Pulmonary M	F	Pulmonary M	F	Non-Pulmonary M	F		
Under 1 year	—	—	—	—	—	—	—	—	—	—
1 - 4	—	—	—	—	—	—	—	—	—	—
5 - 9	—	—	—	—	—	—	—	—	—	—
10 - 14	—	—	—	—	—	—	—	—	—	—
15 - 19	—	—	—	—	—	—	—	—	—	—
20 - 24	1	4	—	—	—	—	—	—	1	4
25 - 34	2	1	—	—	—	—	—	—	2	1
35 - 44	1	—	—	—	—	—	—	—	1	—
45 - 54	1	1	1	—	4	—	—	—	6	1
55 - 64	2	—	1	—	2	—	—	—	5	—
65 and over	—	—	—	—	1	—	—	—	1	—
Total	7	6	2	—	7	—	—	—	16	6

TABLE V

NOTIFICATION OF INFECTIOUS DISEASES BY AGE AND SEX  
(FOR TUBERCULOSIS SEE TABLE VI)

	Under 1 year		1 - 2		3 - 4		5 - 9		10 - 14		15 - 24		25 - 44		45 - 64		65 years and over		All Ages		Total all ages both sexes
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Typhoid Fever . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid Fever . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal Infections . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever . . . . .	—	—	1	—	1	—	5	6	—	—	1	—	—	—	—	—	—	—	7	7	14
Whooping Cough . . . . .	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	1
Diphtheria . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	1	—	2	1	1	—	3	2	5
Smallpox . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles . . . . .	1	13	12	11	18	25	17	1	—	—	—	—	1	—	—	—	—	—	50	49	99
Pneumonia . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	2	—	—	2
Poliomyelitis : Paralytic . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Non-Paralytic . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning . . . . .	—	—	—	—	—	—	—	—	—	—	3	6	1	2	1	4	—	—	5	12	17
Dysentery . . . . .	1	5	3	8	2	28	28	15	6	3	11	6	14	5	4	1	1	71	70	141	141
Malaria . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—



**TABLE VII**  
**TUBERCULOSIS INCIDENCE AND MORTALITY RATES 1934-1966**  
 (QUINQUENNIAL AVERAGES 1934-1963)

<i>Year</i>	<i>Primary Notifications</i>	<i>Notification Rate per 1,000 Population</i>	<i>Deaths</i>	<i>Death Rate per 1,000 Population</i>
1934 - 1938	44	0.78	18	0.35
1939 - 1943	67	1.11	33	0.52
1944 - 1948	75	1.15	26	0.36
1949 - 1953	66	0.96	19	0.28
1954 - 1958	53	0.78	14	0.20
1959 - 1963	34 (16)	0.49	4 (2)	0.05
1964	41 (15)	0.57	3 (—)	0.04
1965	15 (5)	0.21	1 (—)	0.01
1966	22 (7)	0.31	2 (—)	0.03

*Figures relating to patients in mental hospitals situated in the district are included in the total. They are also shown separately in the bracketed figures*



**PART TWO**

**PERSONAL  
HEALTH  
SERVICES**

## PERSONAL HEALTH SERVICES

### Health Screening Clinic, Epsom, 20th to 30th September. 1966

Up to the present few Health Screening Clinics have been organised in this country, and in consequence we have insufficient evidence of the permanent value of this means of detecting early signs of disease. Meanwhile the Minister of Health awaits with interest reports on the findings of future Health Screening Clinics before he is satisfied that this method of detecting disease should be recommended to Local Authorities generally. In October 1965, I visited Dr. R. J. Donaldson's Health Screening Clinic at Rotherham, Yorkshire, because I was interested in the early detection of disease by certain accepted tests. I was impressed by this experiment and with the encouragement of Dr. K. A. Soutar, County Medical Officer, I decided to organise a Clinic along similar lines in Epsom. Planning of this project covered a period of 11 months and entailed close co-operation between Local Authority, General Practitioners, Hospital Consultants and Technicians, the Ministry of Health and representatives of Voluntary Organisations. The Clinic was a stimulating experience and evoked a magnificent team spirit on the part of the staff enthusiastically supported by voluntary helpers. As the Clinic was on the "open door" principle, it was difficult to forecast how many would attend. However, the response over each of the 9 days was so overwhelming that during the last 3 days it was necessary to limit attendances to those living within the Borough. Well over 500 attended daily and the total attendances over the period was 4,844 (3,951 women, 893 men). The tests offered included cervical smear, examination of the breasts, anaemia, diabetes, chest X-ray, hearing, vision and estimation of blood pressure. For years women's organisations have been pressing for the cervical smear test for the early detection of cancer and this proved to be the most important and the most sought after of all the tests. All women between 30 and 60 years were offered this and 3,567 smears were taken. While the gynaecologist took the smear he carried out a full pelvic examination and also an examination of the breasts. A variety of pelvic abnormalities, not necessarily malignant but which nevertheless required treatment, were found. Due to shortage of laboratory staffs, the examination of cervical smears had to be spread over a period of 7 months and results have not yet been finally assessed; but we expect to find signs of early malignant change in about 5 per 1,000: 87 women were referred to the family doctor for breast conditions, e.g. chronic mastitis and fibro-adenoma, three of which have since shown malignant changes. Women of child bearing age commonly suffered from anaemia which was of the iron deficiency type (4.7 per cent.).

At present much attention is focused on the preventive cervical cytology service. While research is proceeding not only in Britain but also abroad much remains to be found out about this "pre-cancerous state" and we need proof that this state necessarily progresses to clinical carcinoma if left untreated. The ministerial policy is to plan mass cervical cytology screening Services and to make them available to all women 'at risk'. The scale of expansion has been based initially on the screening of women over the age of 35 (the priority group). However there is good reason to believe that this screening Service should be designed to bring in younger women; firstly because the early cell change which we recognise as pre-invasive may take 5-10 years to show established malignant changes; and secondly, nowadays women marry at a younger age, pregnancy occurs at a younger age, and parous women under 21 may be in a greater risk group. In accordance with ministerial policy, I look forward in the near future to organising a weekly "well-women" Clinic in the Borough. Parous women, including those of a much younger age group, would be invited to attend for a general examination and a cervical smear. Attendances would be by appointment and numbers limited to 20 per session. Results would be available to the family doctor without delay. The Health Visitor in attendance would welcome this opportunity for Health Education.

### Ante-Natal Care

Ante-Natal sessions are held at the Health Clinics in Ewell and Epsom. At Ewell a weekly session is conducted by a Consultant Obstetrician from Epsom District Hospital assisted by a Medical Officer of the Borough Council. The Midwives hold a session twice weekly at Ewell Clinic and one a week at Epsom Clinic.

Details of attendance at these sessions are given below:

<i>Clinic</i>	<i>Sessions held by</i>	<i>Number of Women who attended during the year</i>	<i>Total Number of attendances during the year</i>
Ewell	Obstetrician and Medical Officer . . . . .	158	1,106
Ewell	Midwives . . . . .	227	1,221
Epsom	Midwives . . . . .	101	364

In addition 72 women attended at Ewell Clinic for post-natal examination.

Health Education

Expectant mothers attended as under at Ewell and Epsom Clinics for Mothercraft (Health Visitors) and Relaxation Exercises (Physiotherapist).

	<i>Number of women who attended</i>	<i>Number of new cases</i>	<i>Total attendances</i>	<i>Sessions per month</i>
Ewell . . .	130	118	504	4
Epsom . . .	58	58	254	4

Analysis of Notified Births

	<i>Live Births</i>	<i>Still Births</i>	<i>Total</i>
Born at Home (Local Authority Midwives) .	200	—	200
Born in Hospitals . . . . .	750	16	766
Born in Nursing Homes . . . . .	6	—	6
Total . . . . .	956	16	972

Prematurity (i.e. babies weighing 5½lb. or less at birth)

Equipment is provided by this Department for the care of premature infants born at home and adequate provision is available in hospital.

(a) Number of premature infants notified

<i>Place of birth</i>	<i>Live Births</i>	<i>Still Births</i>
Own home . . . . .	4	—
Maternity Homes . . . . .	—	—
Hospital . . . . .	58	8
	62	8

(b) Deaths of premature infants within 28 days

In Hospital . . . . .	8
At home . . . . .	—
	8

Congenital Malformations

Since the publication of Ministry of Health Circular 13/63, Local Health Authorities are required to report to the Registrar General all congenital malformations noted at birth. During the year there were 16 notifications representing 1.6 per cent. of total births. The common deformities were talipes, congenital heart, spina bifida and mongolism.

The Unmarried Mother and her Child

The National Council for the Unmarried Mother and her Child are rightly of the opinion that whatever provision is made for illegitimate children, it is likely that they will suffer in a community where the family is the normal social unit. They believe that measures to improve the quality of family life and the social, emotional and educational care of young children are the best contributions to prevention. Education in social responsibility and human relationships need stressing just as well as biological factors. Whatever policies we advocate to limit the number of illegitimate births, there will still be illegitimate children and our first concern must be with them and their parents.

Under the Authority's scheme for the Welfare of Unmarried Mothers and their Children full use was made of the Epsom Deanery Association's Social Workers. During the year 17 girls, ages ranging from 15 to 30 years, were admitted to Voluntary Homes or to the Surrey County Council Home at Dorincourt, Woking. Nine of these Mothers wished to bring up their children and the remainder decided on adoption.



## Child Welfare Clinics

These were held in the afternoons at :

	<i>Average attendance per Session</i>
Ewell Court :—	
Mondays, Wednesdays and Thursdays . . . . .	76
Church Hall, Dell Lane, Stoneleigh :—	
Tuesdays . . . . .	43
Church Hall, Northey Avenue, Ewell :—	
Wednesdays . . . . .	29
Church Street, Epsom :—	
Mondays and Wednesdays . . . . .	71
Wells Social Centre, Epsom :—	
1st, 3rd and 5th Tuesdays . . . . .	38
Church Hall, Rosebery Road, Epsom Downs :—	
2nd and 4th Tuesdays . . . . .	35

## Clinic Attendance

<i>Clinic</i>	<i>Number of children attending clinics born in</i>			
	1966	1965	1961-64	<i>Total</i>
Ewell Court . . . . .	423	413	924	1,760
Dell Lane . . . . .	80	80	199	359
Northey Avenue . . . . .	52	45	135	232
Epsom . . . . .	295	230	388	913
Wells House . . . . .	24	29	66	119
Epsom Downs . . . . .	24	30	53	107
Total . . . . .	898	827	1,765	3,490

## Welfare Foods

National dried milk, orange juice, cod liver oil and vitamin tablets are obtainable during clinic sessions for the use of expectant and nursing mothers, children up to the age of five years and handicapped children. In addition a large variety of proprietary foods are on sale at all clinics at reduced prices. This service is run by voluntary helpers.

## REPORT OF THE SENIOR DENTAL SURGEON

### The Dental Care of Mothers and Young Children

Some 39 expectant or nursing mothers received dental inspections at the Clinics and 50 were given treatment during the year.

Among pre-School Children, the number inspected and who received treatment increased significantly over the previous year. Those inspected numbered 243 and 131 were given treatment. Most of these children were brought by their parents to the Clinics for examination. The remainder were those inspected by visiting Dental Officers in the Nursery Class at West Ewell Infants' School, at the Wells House Residential Nursery and at Waltham House Day Nursery.

It is hoped that through the persistent instruction and advice given by Health Visitors in the homes of parents and at Mothercraft classes, supported by that of the Medical and Dental Officers in the Clinics, this work amongst pre-school children may continue to increase. It is not appreciated by every parent that dental disease in children is to a great extent preventable and that regular dental examinations and any necessary treatment should be commenced soon after the age of two. Also, it is not always known that such inspection and treatment can be obtained for the pre-school child at either the surgery of the Private Practitioner within the National Health Service, or at the Dental Clinics. The use of these facilities together with the dissemination of Dental Health knowledge among parents offer great opportunities to improve the condition of children's teeth.



Epsom Handicraft Class for the Blind



*"Adversity is not without comforts and hopes"*

BACON



*"Welcome one and welcome all" is the keynote at the Myers Hall Day Centre for the elderly and disabled where our guests may relax or join in group activities according to fancy*



*"The world has no such flowers in any land, and no such pearl in any gulf the sea, as any babe  
on any mother's knee."*

SWINBURNE



## Summary of Treatment

### (a) Number provided with dental care

	<i>Examined</i>	<i>Needing Treatment</i>	<i>Treated</i>	<i>Made Dentally Fit</i>
Expectant and Nursing Mothers	39	36	50	34
Children under 5 years	243	121	131	91

### (b) Forms of dental treatment provided

	<i>Scaling and Gum Treatment</i>	<i>Fillings</i>	<i>Silver Nitrate Treatment</i>	<i>Extractions</i>	<i>General Anaesthetics</i>	<i>Dentures Provided</i>		<i>X-rays</i>
						<i>Full</i>	<i>Partial</i>	
Expectant and Nursing Mothers	19	119	—	10	2	3	5	5
Children under 5 years	—	251	22	88	45	—	—	—

(c) Two Dental Treatment Centres were in use for services shown in (b) and the equivalent of 63 Dental Officer Sessions were devoted to Maternity and Child Welfare patients during the year.

### (d) Attendance for dental inspection and treatment

Expectant and Nursing Mothers	161
Children under 5 years	315

## Phenylketonuria

At the age of three weeks, all infants have a urine test for this disease which, untreated, leads to grave mental deficiency. In this condition there is a specific enzyme deficiency which results in the accumulation of a toxic substance in the blood which would normally be rendered non-toxic by the enzyme. We can circumvent the effects by giving a diet low in the toxic substance.

In 1966 Health Visitors carried out about 1,000 such tests in the Borough and no cases of phenylketonuria were discovered.

## Audiological Service

In accordance with accepted practice, all babies have a hearing test at the age of 7 months and any case requiring further investigation is referred to the County Audiologist. A further test is done on every child "at risk" at 2½ years. During the year 721 children had screening tests for hearing and 12 were referred as above. Again, I would stress the importance of the ascertainment of severe deafness before the child's first birthday and certainly before the second. At this early age the specialist teacher is able to get the maximum response from the child's residual hearing and so to teach him to watch for speech and to develop speech and language.

## Recuperative Holidays

Holidays are arranged for patients who have been ill in their own homes or in hospital and who require a period of recuperation without nursing or medical care.

Particulars of cases dealt with during the year are as follows :

	<i>Recommended by Hospital Departments</i>	<i>Recommended by General Practitioners</i>	<i>Total</i>
Number of patients	5	11	16

## Medical Arrangements for Long-Stay Immigrants

The medical examination and surveillance of long-stay immigrants was continued in accordance with the Ministry of Health's advice. During the year we confirmed that 55 immigrants had taken up residential posts in our local hospitals where they had the usual health checks.

Health Visitors called on 24 other immigrants, advised them on how to make best use of our Health Services and gave each an appointment to attend at Epsom Chest Clinie for X-ray and B.C.G. Vaccination if necessary.

## Midwifery Service

One midwife attended a Refresher Course at Oxford and one attended at Westcliffe.

The proportion of domiciliary confinements in 1966 was as follows :

<i>Total Births Live and Still</i>	<i>Domiciliary Confinements</i>	<i>Percentage of Domiciliary Confinements</i>
972	199	20.5

Details of the work of the domiciliary midwives in 1966 was as follows :—

### *Confinements*

(a) Doctor booked . . . . .	199
(b) Doctor not booked . . . . .	Nil
(c) Miscarriages . . . . .	6

### *Number of visits paid by Midwives*

Ante-natal visits . . . . .	1,219
Visits during labour/puerperium/post-natal . . . . .	2,818
Visits to cases discharged from hospitals before end of 10th day . . . . .	1,107

Based on a 10-day lying-in period, hospital beds are provided for approximately 70 per cent. of all confinements. The present high birth rate has caused a shortage both of ante-natal and of maternity beds resulting in an increase in "early discharges" (48 hours after delivery). I am pleased to report that the District Midwife has willingly accepted this increase in her daily duties despite the fact that the really interesting part of the confinement—the birth of the baby—is over before she assumes responsibility. When the expectant mother first attends the Hospital Ante-Natal Clinic, the Obstetrician will base his decision whether or not she is to be booked for hospital confinement :—

- (a) on her medical history ;
- (b) on home conditions as reported by the domiciliary midwife.

If she is considered suitable for "early discharge" the Borough Nursing Officer ensures that a District Midwife will accept the care of the mother and infant during the remainder of the lying-in period while the Home Help Supervisor makes the necessary arrangements for domestic help.

## Home Nursing

The establishment for District Nurse/Midwives is 15 and at the end of the year the equivalent of 12.0 were employed.

### *Particulars of Patients Nursed*

<i>Age Group</i>	<i>Number of Patients</i>	<i>Number of Visits</i>
Under 5 years . . . . .	8	137
Between 5 and 64 years . . . . .	318	5,065
65 years and over . . . . .	689	21,117

The indispensable services of our District Nurses will be in ever-increasing demand as more and more folk live beyond the allotted span of three-score years and ten. During the past year three-quarters of the District Nurses' time was spent on the home care of persons over 65 years.

## Incontinence Pads

Incontinence Pads and protective undergarments have together improved the comfort of the patient and at the same time have eased the burden on the Nurse. Such pads and garments are available on the recommendation of a medical practitioner or a member of the Borough Nursing Staff, free of charge to any patient. During the year 38 incontinent patients came under the care of the District Nurses and 6,000 pads were supplied.

*Disposal of soiled pads.* In homes where there is an open fire or a solid fuel boiler disposal is easy. Where no facilities exist for burning, the soiled pads are placed in specially made waterproof paper bags supplied by the Public Health Department which arranges for collection and disposal by incineration.

### Epsom Day Nursery, Waltham House—50 places

The staff at the Day Nursery, excluding domestic staff, consist of matron, deputy matron, warden, four nursery nurses and four students.

The average daily attendances each month during 1966 were :—

Month	Children Aged		Total Average Daily Attendances
	0 - 2	2 - 5	
January . . . . .	12.0	23.9	35.9
February . . . . .	13.6	29.0	42.6
March . . . . .	14.3	28.2	42.5
April . . . . .	13.5	24.9	38.4
May . . . . .	16.5	27.2	43.7
June . . . . .	14.5	29.2	43.7
July . . . . .	13.3	26.2	39.5
August . . . . .	12.7	18.7	31.4
September . . . . .	13.5	20.3	33.8
October . . . . .	16.8	24.0	40.8
November . . . . .	17.0	28.0	45.0
December . . . . .	14.0	28.3	42.3

The average daily attendance for the year was 40.3.

### Nurseries and Child-Minders Regulation Act, 1948

Under this Act, the Council are responsible for the registration and supervision of day nurseries and of persons who receive children into their homes by day, for financial gain. During the year four nursery premises and four child minders were registered. At the end of the year the number of premises and child minders registered was as under :—

	Number Registered as at 31.12.66	Number of Children looked after
Nursery Premises . . . . .	14	403
Child-Minders . . . . .	11	86

Epsom and Ewell is a deprived area in respect of day nursery places. Before our only Day Nursery (50 places) closes, there is an urgent need for a larger day nursery service in new purpose-built premises. Meantime play groups help to compensate for this deficiency. These play groups are run by registered child-minders either in their own homes or in hired premises, e.g. Church Halls. These modern days, when so many young mothers are at work and families are small, often living in flats and without gardens, facilities for play are not readily available. It is impossible to over estimate the value of play for the developing child. Play is a pleasurable stimulating activity and one of the ways in which the maturing personality expresses itself. Our registered child-minders *do* seek and welcome advice about the management of play groups and we are indebted to Mrs. Margaret Barclay, Therapist of the Child Guidance Clinic team, for inviting play group supervisors to a course of ten meetings in our main Epsom Health Clinic, where by her enthusiasm and skill, she has guided and encouraged free discussion of the emotional needs of the growing child.

### Nursing Homes Act and Regulations, 1963

The Nursing Homes Act 1963 and the relevant regulations provide for adequate and competent staffing, adequate space, furnishing and nursing equipment with sufficient sanitary and washing facilities, light, heating and ventilation. There are two registered Nursing Homes in the Borough providing a total of 44 beds for geriatric patients. These Homes were regularly inspected by the Medical Officer of Health and Borough Nursing Officer. The patients appeared comfortable and reasonably well cared for but shortage of adequately trained nursing staff is an ever present source of anxiety.

### National Assistance Act, 1948

#### National Assistance (Amendment) Act, 1951

Under Section 47 of the 1948 Act power is given to the Councils of County Boroughs and County Districts to apply to a Court of Summary Jurisdiction for an order for removal and detention in a suitable hospital or other place :—

of persons who are suffering from grave chronic diseases, or being aged, infirm or physically incapacitated are living in insanitary conditions, and of persons who are unable to devote to themselves, and are *not* receiving from other persons, proper care and attention.

During the year it was not found necessary to deal with any person under such an Order.



## Ambulance Facilities

The public ambulance service is under the control of the Surrey County Council and the main ambulance control station is situated at Walton Lodge, Banstead (telephone Burgh Heath 53491). There is a sub-station in Church Street, Epsom, which replaced the sub-station in Langton Avenue, Ewell.

In accidents in the home or elsewhere or in case of sudden illness in streets or public places any responsible person may call an ambulance, telephone 999.

Where there is doubt about the maternity patient's fitness for the journey, the decision must be made by the doctor in charge or by a certified midwife who should accompany the patient in the ambulance to hospital. The removal of cases of illness or accident will be arranged by the hospital concerned, or by the medical practitioner in charge of the patient.

## Family Planning

When the present Bill before Parliament reaches the Statute Book, it may empower Local Authorities to expand their Family Planning Services by providing advice and prescribing appliances directly through their own Clinics. During the year Health Visitors have been encouraged to give advice, at their discretion, to Mothers on Family Planning. Up to the present the Council have provided a Family Planning Service indirectly through the Family Planning Association whose local Branch conducts sessions at :

Epsom District Hospital . . . . .	twice a week
Epsom Health Clinic . . . . .	once a week
Ewell Court Health Clinic . . . . .	once a week

At these sessions the Regional Hospital Board and the Borough Council provide accommodation and clinic facilities free of charge.

## Venereal Disease

Press and posters give information to persons, who think they may be suffering from venereal disease, about Hospital Centres where free treatment under conditions of privacy may be obtained. Evening Clinics were available for both sexes at St. Helier Hospital, Sutton and St. Thomas' Hospital, London. Below are given particulars of new cases at St. Helier Hospital.

	<i>Syphilis</i>		<i>Gonorrhoea</i>		<i>Other Conditions</i>	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male*</i>	<i>Female*</i>
Epsom and Ewell . . . . .	—	4	3	1	10	15

*\*The majority of these conditions are not venereal*

## Health Visitor Service

The establishment of Health Visitors for the Borough is 10 :—

5 based at Ewell Court Clinic

3 based at Epsom Clinic

1 geriatric Health Visitor attached to group practices of general practitioners

1 tuberculosis Health Visitor attached to the Chest Department of Epsom District Hospital

The average case load of families per Health Visitor was 391.

Total number of children visited by Health Visitors during the year :—

<i>Born in 1966</i>	<i>Born in 1965</i>	<i>Born in 1961-64</i>	<i>Total</i>
965	980	2,792	4,737

### *Clinic Attendances made by Health Visitors*

(a) Child Welfare Sessions . . . . .	446
(b) Immunisation and Vaccination Sessions . . . . .	12
(c) Health Education (including Mothercraft) . . . . .	87
(d) Geriatric Sessions . . . . .	188

The tuberculosis Health Visitor is responsible for the community care of tuberculous patients and reports on the home conditions of each. At the end of the year 236 patients were under her care.



## Chiropody

Chiropody was available throughout the year to elderly persons, physically handicapped (including the blind and partially sighted) and expectant mothers.

1. By approved private Chiropodists who practise in their own Surgeries.
2. By Chiropodists employed by the Council, one full-time and two part-time who do a total of 5 sessions per week.

In every case the maximum charge is 3s. 0d. per treatment.

The Council make no charge for this service to any person who is in receipt of a supplement to pension from the Ministry of Social Security or whose means are so limited that to pay such a charge would be likely to render him eligible to receive a supplement to pension.

Domiciliary treatment is provided for any person who is physically unable to make the journey. This service, much appreciated and rapidly expanding, helps to keep the old person ambulant. Provision has been made in the Council's current year's estimates for the employment of an additional half-time Chiropodist.

Details of treatment given are shown below :

1. <i>In the Surgeries of Chiropodists approved by the Council</i>	
Number under treatment at 31.12.66 . . . . .	683
Number of treatments given in Surgeries . . . . .	4,135
Number of treatments given at homes of patients . . . . .	1,128
2. <i>Council Chiropodists</i>	
Number under treatment at 31.12.66 . . . . .	502
Number of treatments given at Clinics and Old People's Homes . . . . .	2,073
Number of domiciliary treatments . . . . .	1,046

## Home Help Service

In December 1965 the Minister of Health issued a circular reminding Local Authorities of the value of the provision of Home Helps as an important element of community care and one on which the domiciliary health and welfare services as a whole depend for their proper functioning. He emphasised the need to increase the amount of help given particularly to the elderly and infirm in their own homes. As an aid to further recruitment, he recommended courses for in-service training. To implement his advice we arranged an in-service course in October-November extending over a period of three weeks. This course included talks and practical demonstrations on subjects such as home safety, budgeting, problem families, care of the elderly and the handicapped. Mrs. D. E. Tapping, Home Help Supervisor, acted as course tutor and we had the benefit of outside speakers each an expert in her own field. Meetings were well attended and 21 enthusiastic Helps took the course. I am pleased to report that five new recruits were added to the staff within six weeks. With the ageing population there is an ever increasing demand on the Home Help Service and the number of Helps is still below establishment. The Neighbourly Help Scheme partly compensates for this shortage but again we need more "Good Neighbours" prepared to give daily service and friendly supervision for payment.

The establishment for the Borough is the equivalent of 21 full-time Home Helps.

Helps employed at the end of the year :—

Whole-time Home Helps employed . . . . .	5
Part-time Home Helps employed . . . . .	33
Equivalent full-time Home Helps . . . . .	16.75

The number of cases assisted during the year was :—

Aged 65 years and over . . . . .	278
Chronic sick and tuberculous . . . . .	50
Mentally disordered . . . . .	4
Maternity . . . . .	124
Others . . . . .	67
Total . . . . .	523

Average hours of help given per case . . . . .	53
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## Welfare Services Provided Under the National Assistance Act, 1948

### (a) Blind and Partially-Sighted Persons

The registration of blind persons is not a statutory requirement but blind and partially-sighted persons are encouraged to accept registration in order to qualify for the welfare benefits specially provided. In addition to 86 blind persons in Epsom Hospitals there were at the end of the year 185 registered blind persons and 29 partially-sighted persons in the community, including 64 persons in Swail House. All blind persons are visited by a full-time Home Teacher who works in close touch with the Surrey Voluntary Association for the Blind who have a wide range of supporting services including aids, wireless sets, travel concessions, holiday grants, Braille and Moon literature and talking book machines. The Home Teacher helped by voluntary workers conducts a much appreciated handicraft class one afternoon a week at Christchurch Hall.

#### *Incidence of Blindness*

Number registered as blind during year . . . . .	16
Number registered as partially sighted during year . . . . .	9
<i>Registration of Blind</i>	
Blind persons on Register at 31st December, 1965 . . . . .	181
Number registered during year . . . . .	16
Number transferred in from other areas . . . . .	9
Number re-certified . . . . .	Nil
	25
	206

Number who died during year . . . . .	11
Number transferred to other areas . . . . .	9
Number de-certified . . . . .	1
	21
	185

#### *Age groups of blind persons as at 31st December, 1966*

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Under 5 . . . . .	—	1	1
Aged 5-15 . . . . .	1	—	1
Aged 15-30 . . . . .	3	1	4
Aged 30-50 . . . . .	5	3	8
Aged 50-70 . . . . .	17	39	56
Aged 70 and over . . . . .	33	82	115
	59	126	185

At 31st December, 1966, there were 64 blind persons in Swail House.

Swail House is administered by the London Association for the Blind, but the blind persons are visited and helped by the Borough Home Teacher for the Blind.

There were 86 "C" cases—these are Blind Persons in Hospital and Homes in this area who are on the registers of other authorities but visited by our Home Teacher for the Blind.

There was one blind Home Worker—employed as a chair seater—whose earnings were augmented by the Local Authority.

No blind persons were employed in sheltered workshops.

#### *Partially-Sighted*

Number of partially-sighted on register at 31st December, 1966 :

Male . . . . .	10
Female . . . . .	19
Total . . . . .	29

### (b) Deaf and Hard of Hearing Persons

One trained Social Worker was employed for six sessions weekly. She visited adults in hospital and in the community and was in close touch with the parents of deaf and partially-deaf pupils of school age. Her work was mainly with deaf persons over the age of 16 years, some of whom are dumb and some have speech. In her domiciliary visits she discussed problems of daily living such as employment, the upbringing of children, etc. She assisted in placing deaf men and women in



suitable employment and maintained regular contact with them. Because of language difficulties they needed her help in problems associated with employment, income tax, national health insurance and any other matters not readily understood. An interesting part of her work was the interpretation of any information which the deaf person might wish to communicate in hospital, clinic, police station or law court. She paid social visits to local mental hospitals and conducted regular weekly handicraft and lip-reading class at the Manor Hospital.

The number of persons on the Register of Deaf and Hard of Hearing at 31.12.66 was as follows:

Number of adults in the community . . . . .	23
Number of adults in hospitals . . . . .	37
Number of children up to school-leaving age . . . . .	14
	<hr/>
	74

### (c) Physically Handicapped

The number of handicapped persons at the end of the year was 212.

Diseases of the central nervous system such as multiple sclerosis, strokes and epilepsy formed the largest group, next in frequency came degenerative disease such as arthritis and rheumatism. The disabled were visited in their homes by a trained Social Worker and a Welfare Assistant who procured aids and advised them on house adaptations. The County Council's Occupational Therapy Unit at Fetcham provided the aids and assisted with the adaptations. Articles costing less than £10 are free on loan, over that figure the patient makes a contribution according to his means. During the year the Council supplied 102 aids to 63 persons and assisted with one home adaptation. The Borough Social Worker and her Assistant organised a fortnightly Club for the enjoyment of 20 handicapped persons the majority of whom were wheelchair cases who needed special transport.

### Problem Families—Families at “risk”

During the past 50 years the growth of social sciences such as psychology and sociology has added enormously to our knowledge of human behaviour and has radically altered our approach to social problems. These new fields of knowledge have transformed social work from a patronising concern for the poor to a disciplined approach to those difficulties experienced by all types of people, young and old, which adversely affect their social development and their relationships with others.

It is in meeting people's needs in such difficult situations that our Medical Social Worker uses her special skills and experience in the rehabilitation of problem families. Her job is to help people with needs of a special kind which result in chronic unhappiness, frustration, personal failings and inability to respond or relate adequately to other people. The failure to make satisfactory personal relationships is associated with marital disharmony and broken homes which lead to social evils such as lowered moral standards, delinquency, debt, etc. To members of the family in trouble, the Social Worker is first a good listener and although she offers sympathy and understanding, she does try to guide the family to see their problems objectively, and this takes time. Her constant aim, however, is not to give them direct advice but to show them how difficulties have arisen and how they themselves may work out a more realistic and socially acceptable solution. The medical social worker may obtain temporary financial and other material help and may seek the co-operation of other agencies to help adjustment because social work involves more than a special one-to-one case-work relationship. Families “at risk” often need help in building up good relationships with those with whom they are in daily contact and, by enlisting the sympathy and concern of these close contacts, she can bring their influence to play an important part in the family's rehabilitation. Because human needs are many and complex and the variety of skills within the Social Services so large, we must have specialist social workers. At the same time we must bear in mind that the needs which they set out to meet are related, and that close and continued co-operation is necessary in the interests of those they are seeking to help.

There are still too many examples of the Medical Social Worker being called in at a crisis when family breakdown is imminent and when it is clear that earlier work would almost certainly have prevented the situation deteriorating in the way it did. But even close co-operation between the various social workers will not *alert* them sufficiently early unless they are closely linked with other public services and local organisations and, through these, with the community at large. When these closer links are forged, the Medical Social Worker can look forward :—

- (1) to the preventive aspects of her work becoming a reality ;
- (2) to the work of rehabilitation becoming easier and more successful.

At the end of the year, 31st December, 1966 :—

Number of problem families under supervision . . . . .	29
Number of children in these families . . . . .	112
Number of children of these families in the care of the Local Authority . . . . .	1

## Health Education

Health Education continued along the same lines as last year.

The teenager and the young adult are repeatedly reminded by the exhibition of posters and by formal talks, of the dangers of cigarette smoking. Whilst they accept the facts, they yet stubbornly refuse to relinquish pleasurable habits. Since 1960, educational experts in England and Scotland have been experimenting with a new concept known as "programmed learning" designed to cut out emotional overtones between teacher and pupil. This new approach promises good results and presents an interesting field for research. The programmes are factual, the illustrations are in programmed form and each testing situation endeavours to elicit a behaviour response which shows that the child has absorbed the facts in a personal way. Thus the pupil studies and answers a series of printed programmes designed to encourage healthy attitudes. This factual education should start during the last three years of primary school, should be sustained and must teach facts as they affect the child and must include wider implications of community health. Group discussion should commence in the last year of primary school and continue into secondary school in this and in similar health education subjects.

## Care of the Elderly

As a direct result of the progress of medical science, the pattern of disease in the community is changing. Infectious disease and acute killing conditions have receded to leave a growing challenge of chronic and degenerative conditions in their place. To-day, death has been largely reserved for old people and more of the population each year can expect to live to post-pensionable age. The care of the old is largely a community responsibility and the family and the welfare state must be thought of as complementary. Aware of the need to provide more accommodation suitable for the needs of the elderly, the Council have planned the erection on the Longmead Estate of more flats and bungalows along the lines of Tomlin Court. Future tenants will enjoy such amenities as central heating and an adequate supply of hot water, the cost of which will be included in the rent charges. These dwellings will be at safe distance from the main road and readily accessible to shops and to a proposed Day Centre, which we plan to locate in a new multi-purpose Hall. At this Centre, staff will provide:—

- (1) Hot lunches
- (2) Chiropody
- (3) Physiotherapy
- (4) Hairdressing and hot showers
- (5) Recreational facilities

Through the courtesy of the Borough Council, the Myers Hall was made available from December 1966 for providing a Day Centre for the frail elderly. The whole conception of this Day Centre is part of a team effort which integrates both voluntary and statutory welfare services. The Centre is administered by the Epsom and Ewell Old People's Welfare Committee. The aim is to bring the physically handicapped and socially isolated into a friendly informal atmosphere where, in addition to partaking of a good meal, they can enjoy each others' company and share in occupational and recreational activities; and the adults in the home from which these people come may enjoy a well-earned break. The Centre caters for up to 40 persons and opens every Thursday, 10.30 a.m. with morning coffee, then lunch followed by a rest or recreation according to fancy. A Council occupational therapist instructs in simple handcraft. After tea the guests are taken home about 4 p.m. Maximum charge is 2s. 0d. per day. A rota of members of the Mothers' Union act as hostesses and serve meals. St. John Ambulance volunteers help to look after the more disabled. Hot meals are transported from The Cedars Central Kitchen in insulated containers by Council min-van. Transport for guests to and from the Centre is provided by a team of voluntary car drivers.

## Mental Health

One of the great discoveries of modern medicine is that the human mind is as prone to sickness as the human body. Milder forms of mental disturbance are almost as widespread as the common cold. Almost all of us—though not seriously ill—suffer from periods of poor mental health. The seeds of emotional and mental disturbance are often planted in childhood under circumstances over which the individual has no control.

The Mental Health Officers, trained Social Workers and Health Visitors continued their supervision of the mentally ill and mentally sub-normal in the community. This supporting service helps both the patient and his family and encourages him to be a useful member of society.

## Training Centres for the Sub-Normal

The 50-place Junior Training Centre at Old Schools Lane, Ewell, was expanded by the provision of 20 places at the Forty-Foot Hall, Forty Foot Road, Leatherhead. At the Junior Training Centre, the child learns socially acceptable habits and creative work and enjoys organised games. Thirteen children from the Borough attended the Centre in 1966.



The scope of the light industrial work carried out by trainees at the 100-place Adult Technical Training Centre, Banstead, has expanded and has become much more diversified. Real skills are acquired by some of the trainees in the operation of machines turning out industrial products for sale. Eighteen adults from the Borough attended at Banstead during 1966.

## Day Centre

I am pleased to report that the Day Centre at Waterloo Road, run by trained staff appointed by Surrey County Council has got off to a good start. Not only does it help the rehabilitation of ex-mental hospital patients, but it supports disturbed members of the community.

## Voluntary Organisations

(1) The voluntary helpers of the *Handshake Social Club* (run by the Epsom League of Friends for Mental Health) work harmoniously with the *Day Centre* professional staff and share the same premises. The voluntary helper realises that in the interests of the patient she must work under the guidance and supervision of the trained worker.

(2) *The Industrial Therapy Organisation (Epsom) Ltd., Stones Road.* With the financial support of the Ministry of Labour, the 75 trainees are re-imbursed for travelling expenses, are paid incremental training allowances and, where they live outside the mental hospital, they receive lodging allowances. The Ministry's disablement re-settlement Officer assists in the initial selection of trainees and also with the vitally important job of finding suitable open employment for those who qualify. During the year 41 trainees were set on the road to complete rehabilitation and were placed in open employment within the community—surely a fine achievement for a Voluntary Organisation!

## Mental Health—Statistics

### (a) Mental Illness—Mental Health Act 1959

#### CASES DEALT WITH INSIDE THE LOCAL (MENTAL) HOSPITALS

	Males	Females	Total
Section 25 (Observation Order) . . . . .	110	115	225
Section 26 (Treatment Order) . . . . .	71	85	156
Total . . . . .	181	200	381

#### HOSPITAL ADMISSIONS FROM ADDRESSES IN EPSOM AND EWELL

	Males	Females	Total
Section 5 (Informal)* . . . . .	31	26	57
Section 29 (Emergency Observation—3 day Order) . . . . .	12	12	24
Section 25 (Observation Order—28 days) . . . . .	8	5	13
Section 26 (Treatment Order) . . . . .	1	—	1
Section 136 (Police Order—3 days Place of Safety) . . . . .	2	—	2
Total . . . . .	54	43	97

\* This figure represents the number of patients admitted informally by the Mental Welfare Officer. A larger number are admitted informally by medical practitioners and from psychiatric clinics but we have no record of this figure.

### (b) Care and After-Care

Fifteen males and fourteen females were referred to Mental Health Officers (including Mental Health Social Workers) for supportive care.

Total number receiving Community Care as at 31st December, 1966 :

Males . . . . .	58
Females . . . . .	32
	90

### (c) The Sub-Normal and Severely Sub-Normal

#### POSITION AT END OF 1966

	Males	Females	Total
Number of children attending Junior Training Centres	6	7	13
Number of adults attending Senior Training Centres	12	6	18
	18	13	31
Number of children in community care of Health Visitor	7	8	15
Number of adults in community care of Health Visitors and Mental Health Officers	34	15	49
	41	23	64

## Health Centres

To-day there is an unprecedented surge of interest in Health Centres belated perhaps but warmly to be welcomed—so said the Minister of Health in opening a recent Health Congress. All this reflects the growing readiness of the family doctor and local health services to work together to their mutual advantage and for the benefit of the community. Last year, I reported that the Council envisaged the building of a new Health Centre in Ewell Village to serve an estimated population of upwards of 20,000. Since then the planning has progressed so smoothly with the co-operation of the eight general practitioners concerned that the Local Health Authority hope to commence building during the financial year 1967-68. The Centre will make the integration of the community health services a reality and an attachment of Health Visitors and District Nurses to general practices will lighten the work load of the family doctor.

### LOCATION AND TIME-TABLE OF CLINICS

#### ANTE-NATAL CLINICS

Epsom District Hospital . . . . .	Mon., Thurs. . . . .	2.00 p.m.
Church Street, Epsom . . . . .	Fri. (Midwives) . . . . .	2.00 p.m. - 4.00 p.m.
Ewell Court, Ewell . . . . .	Mons. . . . .	9.30 a.m. - 12 noon
	Tues. (Midwives) . . . . .	2.00 p.m. - 4.00 p.m.
	Fri. (Midwives) . . . . .	2.00 p.m. - 4.00 p.m.

#### CHILD WELFARE CLINICS

Church Street, Epsom . . . . .	Mon., Wed. . . . .	2.00 p.m. - 4.00 p.m.
Ewell Court, Ewell . . . . .	Mon., Wed., Thurs. . . . .	1.30 p.m. - 4.00 p.m.
Dell Lane, Stoneleigh . . . . .	Tues. . . . .	2.00 p.m. - 4.00 p.m.
St. Stephen's Church Hall, Rosebery Road, Epsom Downs . . . . .	1st, 3rd & 5th Tues. in month . . . . .	2.00 p.m. - 4.00 p.m.
Community Centre, Wells Estate, Epsom . . . . .	2nd & 4th Tues. in month . . . . .	2.00 p.m. - 4.00 p.m.
St. Paul's Church Hall, Northey Avenue, Cheam . . . . .	Wed. . . . .	2.00 p.m. - 4.00 p.m.

#### DENTAL CLINICS

Church Street, Epsom . . . . .	By Appointment
Ewell Court, Ewell . . . . .	By Appointment

#### EYE CLINICS

Church Street, Epsom . . . . .	By Appointment
Ewell Court, Ewell . . . . .	By Appointment

#### FAMILY PLANNING ASSOCIATION

Epsom District Hospital . . . . .	Tues., Fri. . . . .	7.00 p.m. - 8.00 p.m.
Church Street, Epsom . . . . .	Thurs. . . . .	9.30 a.m. - 12 noon
Ewell Court, Ewell . . . . .	Tues. . . . .	9.30 a.m. - 12 noon

#### CHEST CLINIC

Epsom District Hospital . . . . .	Mon., Tues. . . . .	2.00 p.m.
	Thurs. . . . .	9.30 a.m.
	1st Thurs. (B.C.G.) . . . . .	2.00 p.m.
	3rd Thurs. . . . .	5.30 p.m.
	Fri. . . . .	9.30 a.m.

#### VENEREAL DISEASES CLINIC

St. Helier Hospital . . . . .	Males : Mon. . . . .	10.00 a.m. - 12 noon
	Thurs. . . . .	4.00 p.m. - 6.00 p.m.
	Females : Tues. . . . .	4.30 p.m. - 6.30 p.m.
	Fri. . . . .	2.00 p.m. - 4.00 p.m.

(And at the Out-Patient Department of many London Hospitals)

#### IMMUNISATION AND VACCINATION CLINICS

Church Street, Epsom . . . . .	Fri. . . . .	9.30 a.m. - 12 noon
Ewell Court, Ewell . . . . .	2nd, 4th & 5th Mon. . . . .	11.00 a.m.

#### MINIATURE X-RAY CLINIC

Epsom District Hospital . . . . .	Mon. . . . .	2.00 p.m. - 3.00 p.m.
	Tues. . . . .	10.30 a.m. - 11.30 a.m.

**PART THREE**

**ENVIRONMENTAL  
HEALTH  
SERVICES**

*June, 1967*

**To the Mayor, Aldermen and Councillors of the Borough of Epsom and Ewell**

MR. MAYOR, LADIES AND GENTLEMEN,

I beg to submit my Annual Report on the work of the Public Health Inspectors for the year ended 31st December, 1966, in accordance with the Public Health Officers Regulations, 1959.

In compiling this Report, much of the work must, of necessity, be presented in statistical form but scrutiny of the Summary of Inspections and Visits will reveal the wide ranging aspects of the work of the Public Health Inspectorate. The total continues to rise, this year reaching 9,610 ; all indications are such as to lead one to forecast that the 10,000 mark will soon be reached. The principal activities relate to Housing, Drainage, Food and Food Hygiene, and Offices and Shops, where again the volume of work continues at the high level experienced in recent years.

In relation to Housing, the emphasis is now directed to Compulsory Improvement of tenanted houses, and the second Improvement Area was declared during the year, involving 48 tenanted houses.

The section on Food and Food Hygiene again takes up a large part of the Report illustrating its importance in this age. An addition to this work of inspection and control is seen in the scheme to test foodstuffs for pesticide residues, so that an appreciation may be made of the extent, if any, of this type of contamination by toxic chemicals.

The administration of the Offices, Shops and Railway Premises Act, 1963, is progressing smoothly, and only one prosecution was necessary during the year.

On the question of Air Pollution, the marked trend of householders to change to smokeless fuels continues and even within this grouping, the use of gas, electricity and oil is overtaking that of solid fuels. I would draw attention to the survey of 600 houses in the Cuddington, Ewell Court and Stoneleigh Wards which markedly illustrates these points and supports the Council's contention that the Borough should not be classed as a "black area".

Of new legislation coming into force it should be noted that Byelaws have now been adopted in respect of barbers' and hairdressers' establishments, for the purpose of securing cleanliness of premises and practice.

I should like to record my appreciation of the support given me by Members of the Council, to Alderman W. J. Clark, P.P.I.A.A.S., F.I.A.S., F.R.S.A., F.R.S.H., Chairman of the Public Health Committee, for his continuing encouragement, for the help and guidance proffered by Dr. P. H. R. Anderson, Medical Officer of Health, to the Officers of other Departments for their co-operation, and to the staff of the Department for their loyal support.

I am, Ladies and Gentlemen, Your obedient Servant,

L. H. GRACE  
*Chief Public Health Inspector*



# SANITARY INSPECTION OF THE AREA

## Summary of Inspections and Visits

Dwelling Houses :—	
Under P.H. Act and Housing Acts . . . . .	282
Reinspections . . . . .	1,025
Other Premises :—	
Under P.H. Acts 1936 and 1961 . . . . .	49
Reinspections . . . . .	158
Complaints investigated (excluding rats and mice) . . . . .	316
Drainage :—	
Inspections . . . . .	986
Water Tests . . . . .	242
Smoke Tests . . . . .	21
Other Tests . . . . .	19
Cesspools inspected . . . . .	101
Animal Boarding Establishments Act 1963 . . . . .	5
Betting, Gaming and Lotteries Act 1963-64 . . . . .	34
Children's Nightdresses Regulations 1964 . . . . .	9
Clean Air Act 1956 :—	
Smoke Observations or Air Pollution . . . . .	34
Survey visits . . . . .	502
Employment Agencies . . . . .	1
Factories :	
With Power . . . . .	131
Outworkers . . . . .	7
Food :	
Inspection of Premises . . . . .	1,579
Visits re Unsound Food . . . . .	382
Heating Appliances and Fireguards . . . . .	35
Infectious Disease—Enquiries and Visits . . . . .	803
Insect Pests . . . . .	139
Keeping of Animals or Poultry . . . . .	14
Noise Abatement Act 1960 . . . . .	3
Pet Animals Act 1951—Licences, etc. . . . .	18
Public Conveniences . . . . .	46
Rat or Mice infestation . . . . .	75
Riding Establishments Act 1964 . . . . .	22
Rivers and Streams . . . . .	29
Schools, Sanitary Accommodation, Disinfestation, etc. . . . .	43
Scrap Metal Dealers Act 1964 . . . . .	1
Shops Act 1950—Hours, etc. . . . .	559
Offices, Shops and Railway Premises Act 1963 :—	
Offices . . . . .	282
Shops . . . . .	717
Stables and Piggeries . . . . .	47
Swimming Pools . . . . .	35
Theatres, Cinemas, Halls, etc. . . . .	10
Vacant Land, Dumps, etc. . . . .	80
Verminous Premises or Articles . . . . .	13
Hairdressing Establishments . . . . .	47
Refuse Collection, dustbins, etc. . . . .	113
Screening Clinic . . . . .	54
Visits—Miscellaneous (not included above) . . . . .	542

9,610

## SAMPLING

Samples under Food and Drugs Act 1955 . . . . .	78
Ice Cream Samples . . . . .	127
Milk Samples (Bacteriological) . . . . .	104
Bacteriological Sampling of Sundry Foods . . . . .	74
Water Samples from :—	
Main supplies (domestic) . . . . .	219
Mental Hospitals—	
Deep Well . . . . .	51
Mixed Supply . . . . .	47
Mains Supply . . . . .	186
Swimming Baths and Pools . . . . .	35

## COMPLAINTS

The following is a summary of complaints received during the year

Choked or Defective Drains . . . . .	58
Condition of Rye Brook . . . . .	2
Dirty Milk Bottles, etc. . . . .	8
Flooding . . . . .	12
Insanitary condition of premises . . . . .	35
Noise . . . . .	8
Nuisances from flies or other insect pests . . . . .	23
Offensive accumulations . . . . .	36
Offensive smells . . . . .	34
Overcrowding . . . . .	3
Smoke . . . . .	27
Sunday Trading . . . . .	1
Unsound Foods, etc. . . . .	45
Vermin . . . . .	6
Miscellaneous . . . . .	18

316

Additionally, 755 complaints were made in respect of Rats and Mice infestation . . . . .

755

## NOTICES

Number of Notices served under the following Acts

Public Health Act 1936 (Section 93) (Statutory) . . . . .	6
Public Health Act 1936 (Informal) . . . . .	80
Factories Act 1961 (Informal) . . . . .	7
Food and Drugs Act 1955 (Informal) . . . . .	92
Offices, Shops and Railway Premises Act 1963 (Informal) . . . . .	74

1,071

## SUMMARY OF NUISANCES ABATED, DEFECTS REMEDIED AND OTHER MATTERS ATTENDED TO

### Dwelling Houses and Other Premises

Roofs repaired . . . . .	27
Eaves gutters and downpipes repaired . . . . .	16
Repointing or rendering of brickwork . . . . .	1
Other work carried out to remedy dampness . . . . .	6
Choked drains cleared . . . . .	52
Drains repaired or relaid . . . . .	80
Inspection chambers built or repaired. . . . .	33
New W.C's installed . . . . .	38
W.C's renewed or repaired . . . . .	36
W.C. flushing cisterns renewed or repaired. . . . .	6
New baths installed . . . . .	24
Soil vent pipes or F.A.I's renewed or repaired . . . . .	13
New gullies provided . . . . .	23
Sink gully surrounds repaired . . . . .	1
New sink or wash hand basins provided or renewed . . . . .	70
Waste pipes provided or renewed . . . . .	3
Water service pipes renewed or repaired . . . . .	6
Cesspools emptied or repaired . . . . .	2
Existing housedrains connected to public sewer . . . . .	1
Yard paving provided or repaired . . . . .	1
Rooms cleansed or redecorated . . . . .	3
Plaster walls and/or ceilings repaired . . . . .	15
Floors repaired or renewed . . . . .	17
Staircases repaired or renewed . . . . .	2
Doors repaired or renewed . . . . .	2
Window frames repaired or renewed . . . . .	10
Sashcords, provided or renewed . . . . .	3
Disinfection of rooms or articles on request . . . . .	1
Rooms, etc., sprayed for flies or other insect pests . . . . .	9
Offensive accumulations removed . . . . .	1
Other nuisances abated or defects remedied . . . . .	2
Urinals, cleansed and repaired . . . . .	5

## HOUSING

### I. Inspection of dwelling-houses during the year

1 (a)	Total number of dwelling-houses inspected under the Public Health or Housing Acts	282
(b)	Number of inspections or reinspections . . . . .	1,025
2	Number of dwelling-houses found not to be in all respects reasonably fit for human habitation	80

### II. Number of defective dwelling-houses rendered fit

(a)	After informal notice . . . . .	60
(b)	After service of formal notice . . . . .	6
(c)	Number of notices outstanding at end of year . . . . .	14

### III. Proceedings under the Housing Act 1957

#### Individual Unfit Houses :—

Number of dwelling-houses found unfit for human habitation and represented under Section 16(1) of the Housing Act 1957	7
--	---

#### Resulting action :—

Demolition orders made. . . . . (3 orders made following representations in 1965)	9
Closing Orders made . . . . .	1

#### No. 2 Clearance Area 1962

Comprising eight dwellings. Order for demolition made and confirmed by Ministry of Housing and Local Government on the 29th April, 1964. Four tenants re-housed by the Council, the others finding their own accommodation.

Premises demolished 1966.

#### No. 1 Clearance Area 1965

Comprising seven dwellings. Order for Demolition made and confirmed by Ministry of Housing and Local Government on the 15th November, 1966.

Progress to end of year—One tenant rehoused by Council.

### Slum Clearance

The position in respect of Slum Clearance is constantly under review. Since 1955, 124 properties have been dealt with as the result of Clearance Areas, the making of Demolition and Closing Orders and the repair of Unfit Houses. An estimated 147 properties are listed as outstanding. The figure is given as an estimation, as it related to those houses which on inspection may be shown to require action for closure or demolition, having regard to the definition of fitness (Section 4, Housing Act 1957) and the overall standard of dwelling houses in the Borough by which they are judged. The rate of progress which can be achieved is governed by the ability of the Council to rehouse the displaced families and close liaison exists between the Public Health and Housing Committees.

During 1966 ten families were rehoused by the Corporation as a result of formal action taken under the Housing Acts, making a total of 71 since the inception of the Slum Clearance Programme in 1955.

### Improvement of Houses

The Housing Act 1964, gives power to local authorities to require in certain circumstances, the improvement of tenanted dwellings which were built before the end of 1944, or provided by conversion before the 3rd October 1961, or pre-1945 buildings.

The improvements relate to the provision of the Standard Amenities, which in full are :

- (a) a fixed bath or shower, which, if reasonably practicable, is to be in a bathroom ;
- (b) a wash-hand basin ;
- (c) a hot and cold water supply at a fixed bath or shower and at a wash-hand basin and at a sink ;
- (d) a water closet which must, if reasonably practicable, be in and readily accessible from the dwelling ; and
- (e) satisfactory facilities for storing food.



Good progress is being maintained in this very important aspect of housing. As a result of the making of the Council's first Improvement Area in 1965, which related to houses in Chessington Road, West Ewell, seven voluntary undertakings to improve were accepted, one "Full Standard" Immediate Notice and one Suspended Notice were served, this latter Notice providing control for possible improvement within the ensuing five years. At December 1966 works were in progress at four of the houses.

No. 2 Improvement Area comprising 210 dwellings in Hurst Road, Lower Court Road, Upper Court Road and Horton Footpath, Epsom, with 48 tenanted properties capable of improvement was declared in October 1966, and the detailed inspection of the houses has proceeded without delay.

Two applications from tenants of houses outside Improvement Areas, for the Council to exercise their like powers to improve the dwellings to the full standard were received. An undertaking was accepted for one house and in the other case, the requisite Preliminary and Immediate Notices were served.

During the year 49 Standard Grants and 2 Discretionary Grants were approved by the Council, and of this number are included those in respect of properties coming within the Compulsory Improvement Scheme.

### Houses in Multiple Occupation

The Housing Act 1964, strengthens and extends the powers given to local authorities in Part II of the Act in 1961, which made provision in general for improving the standards in the living conditions of these types of dwellings.

The work of inspection and control of premises coming within the definition of Houses in Multiple Occupation, which commenced in 1963, continued during the year and the present position is as follows :

Number of premises inspected during 1966 . . . . .	47
Number of premises in use at the end of 1966 . . . . .	15

No undue delay has been experienced in securing the improvements necessary to satisfy the Standards adopted by the Council, and no action has been necessary to make Control Orders (Control Orders allow local authorities to take multi-occupied houses into their stewardship for a period in order to deal with the worst cases of squalor).

### Rent Act 1957—Certificate of Disrepair

No application was received for a Certificate of Disrepair.

The following is a summary of the position with regard to applications on the 31st December, 1966 :—

Undertakings (Form K) received from Landlords . . . . .	85
Certificates of Disrepair issued . . . . .	21
Applications for Certificates as to remedying defects . . . . .	6
Applications for Certificates not approved . . . . .	3
Applications under consideration . . . . .	—
<hr/>	
Total number of applications received . . . . .	115
<hr/>	
Certificates of Disrepair cancelled . . . . .	8

### Schools

All schools in the Borough are visited for the purpose of milk and water sampling, inspection of sanitary accommodation and inspection of canteens and kitchens.

There are nine private schools in the Borough.



# **FACTORIES ACT 1961**

## **Prescribed Particulars on the Administration of the Factories Act 1961**

(1) *Inspections for purpose of provision as to health (including inspections made by Public Health Inspectors)*

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6, are to be enforced by Local Authorities . . . . .	—	—	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority . . . . .	141	131	7	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	—	—	—	—
Total . . . . .	141	131	7	—

(2) *Cases in which defects were found*

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred		
			To H.M. Inspector (4)	By H.M. Inspector (5)	
Sanitary conveniences (S.7):—					
(a) Insufficient . . . . .	—	—	—	—	—
(b) Unsuitable or defective . . .	7	4	—	—	—
(c) Not separate for sexes . . .	—	—	—	—	—
Other offences (not relating to outwork)	—	—	—	—	—
Total. . . . .	7	4	—	—	—

(3) *Outwork (Sections 110 and 111)*

Nature of Work (1)	Section 110			Section 111		
	No. of outworkers in August list required by Section 110(1)(e) (2)	No. of cases of defaults in sending lists to the Council (3)	No. of prosecutions for failing to supply lists (4)	No. of instances of work in unwhole- some premises (5)	Notices served (6)	Prosecutions (7)
Wearing apparel (making etc. cleansing & washing) curtains and furniture hangings . . . . .	6	—	—	—	—	—
Total. . . . .	6	—	—	—	—	—

## FOOD AND DRUGS ACT 1955

### Inspections and Supervision of Food

This section of the Report deals with those aspects of food and drugs administration which are the concern of the local authorities and details of the work carried out in connection therewith are found as follows :—

#### *Food Hygiene (General) Regulations 1960*

The Regulations apply to any place where food is handled or supplied in the course of a food business, whether there is actual sale or not. They apply, broadly speaking, throughout the food and catering trades, and to the supply of food in clubs, schools, residential establishments and staff canteens, and also to stalls and vehicles and now to ships.

The aim of the Regulations is to set a practical standard of food hygiene and centres on three main aspects ; the structural condition of the premises, the construction and cleanliness of articles and equipment with which food may come into contact and the cleanly practices of food handlers themselves while they are preparing or handling the food.

The number of food premises in the Borough, grouped in categories of trade are listed below :—

Bakehouses and Bakers' Shops . . . . .	19
Butchers . . . . .	31
Cafes . . . . .	35
Clubs . . . . .	10
Confectioners . . . . .	64
Dairies and Milk Depots . . . . .	3
Fishmongers and Fried Fish Shops . . . . .	17
Greengrocers (Wholesale and Retail) . . . . .	35
Grocers (Wholesale and Retail) . . . . .	77
Kitchens :	
Factory . . . . .	6
Hotel . . . . .	8
Hospital and Nursing Home . . . . .	9
School—Public . . . . .	18
School—Private . . . . .	9
Multiple Food Stores (Supermarkets) . . . . .	8
Public Houses and Off-Licences . . . . .	63
Total . . . . .	<u>412</u>

All these premises are fitted with wash-hand basins and sinks, together with hot and cold water supplies, as required by Regulations 16 and 19 of the Food Hygiene (General) Regulations.

Of the preceding premises, 174 are registered under Section 16 of the Food and Drugs Act 1955, as follows :—

Manufacture of Ice Cream . . . . .	1
Retail sale of Ice Cream . . . . .	116
Preparation or manufacture for sale of sausages or potted, pressed, pickled or preserved food . . . . .	57

The inspection of food premises is a constant duty imposed by the Regulations. The number of inspections made during the year is shown in the following table :—

<i>Type of Premises and Vehicles</i>	<i>No. of Inspections and visits</i>
Bakehouses . . . . .	26
Bakers and Confectioners . . . . .	58
Butchers . . . . .	178
Cafes, Canteens and Kitchens . . . . .	269
Dairies and Milk Shops . . . . .	40
Fishmongers and Poulterers . . . . .	45
Fried Fish Shops . . . . .	22
Greengrocers and Fruiterers . . . . .	122
Grocery and Provision Stores . . . . .	274
Ice Cream manufacturers . . . . .	52
Ice Cream retailers . . . . .	55
Ice Cream vehicles . . . . .	33
Licensed Premises . . . . .	137
Market Stalls and Food Vehicles . . . . .	72
Sweets and Sugar Confectionery . . . . .	77
Visits, miscellaneous (not included above) . . . . .	119
Total . . . . .	<u>1,579</u>

### *Informal Action*

Arising from the 1,579 inspections and visits to food premises, action to secure compliance with the Regulations was obtained through verbal or written informal Notices, details of which are as follows :

Walls and/or ceilings cleansed . . . . .	28
Plaster of walls and/or ceilings repaired . . . . .	8
Interior paintwork renewed . . . . .	3
Floors repaired or renewed . . . . .	15
Lighting or ventilation improved . . . . .	10
Other structural repairs carried out . . . . .	6
Sinks installed or renewed . . . . .	8
Constant hot water supply installed . . . . .	13
Drainage improved or repaired . . . . .	1
Yard paving provided or repaired . . . . .	2
New dustbins provided . . . . .	5
Nuisances abated or other defects remedied . . . . .	3
W.C's etc. cleansed and/or redecorated . . . . .	5
New W.C's installed . . . . .	1
Wash-hand basins installed . . . . .	4
Soap, nail brushes or towels provided . . . . .	1
First-aid materials provided . . . . .	5
Drinking water supplied . . . . .	1

### *Formal Action*

As indicated in the foregoing table, the matters receiving attention were the result of informal action and much of this remedial work arises from normal wear and tear. However, the circumstances at one food shop were such that the Council decided to take legal proceedings under the Regulations. The defendants pleaded guilty in respect of five summonses which related to lack of cleanliness and repair aggravated by a severe infestation of mice. A fine of £250 was imposed with twenty-five guineas costs.

## **MILK**

### **Milk Production**

Of recent years the production of milk in the Borough sharply declined and during 1965, the one remaining producer Horton Estate Farm (South West Metropolitan Regional Hospital Board), ceased business. However, a dairy herd has now been privately re-established using part of the same farm buildings and land. The Producer sells his milk in bulk to one of the large London Milk Companies where it is pasteurised.

### **Milk Supply**

All milk sold is retailed by a few large Dairy Companies, being mainly produced in distant areas and transported to large processing plants within the London Region.

Control in respect of the distribution and types of milk sold in the Borough is obtained under the following Regulations :

#### *(a) Distribution*

Milk and Dairies (General) Regulations 1959 :

Milk Distributors registered in this area . . . . .	3
Premises registered as Dairies . . . . .	3

#### *(b) Licensing*

Milk (Special Designation) Regulations 1963 and the Milk (Special Designation) (Amendment) Regulations 1965.

Dealers (Pre-packed) Milk Licences valid for a maximum period of five years expiring on the 31st December 1970 are in force in respect of the following milks :—

Homogenised . . . . .	1
Untreated . . . . .	10
Pasteurised . . . . .	23
Sterilised . . . . .	22
Ultra Heat Treated . . . . .	10

Following the introduction of the new designation "Ultra Heat Treated" in 1965, 10 licences were granted during the year. Present indications do not suggest that this new long-life milk is yet being bought in any quantity.



Milk Sampling

During the year 102 samples of milk were taken from milk distributors, including supplies to local hospitals and schools, and submitted for bacteriological examination.

The following summary gives details of the grade of milk samples and results of the examinations :

Grade	No. of Samples
Untreated . . . . .	1
Pasteurised . . . . .	90
Sterilised . . . . .	8
Ultra Heat Treated . . . . .	1
Farm Bottled . . . . .	1
Separated . . . . .	1

Results of Tests

	Methylene Blue	Phosphatase	Turbidity Satisfactory	Brucella Ring	Colony Count Satisfactory
Untreated . . . . .	1	—	—	—	—
Pasteurised . . . . .	90	90	—	—	—
Sterilised . . . . .	8	—	8	—	—
U.H.T. . . . .	—	—	—	—	1
Farm Bottled . . . . .	—	—	—	1	—
Separated. . . . .	—	—	1	—	—
	99	90	9	1	1

All the tests were satisfactory for the purposes applied.

MEAT AND OTHER FOODS

Slaughterhouses

There are no licensed slaughterhouses in the Borough.

Condemned Meat and Other Foods

The following meat and other foods were inspected at shops and food stores within the Borough and found to be unfit for human consumption :—

Commodity	No.	lbs.	No. Tins or Jars	No. of Packets or Cartons
Cheese . . . . .	—	42	—	—
Cooked Ham . . . . .	—	34	—	—
Cream, Milk . . . . .	—	—	45	—
Fish . . . . .	—	154	298	—
Frozen Foodstuffs . . . . .	—	—	—	5,601
Frozen Poultry . . . . .	143	126	—	—
Fruit . . . . .	—	66	2,697	—
Ice Cream Products . . . . .	574	—	—	—
Jams . . . . .	—	—	95	—
Meat and Offal . . . . .	—	1,895	405	—
Rice . . . . .	—	—	21	—
Soup . . . . .	—	—	50	—
Spaghetti Products . . . . .	—	—	30	—
Sugar. . . . .	—	15	—	—
Vegetables . . . . .	—	224	682	—
Sundry other Foodstuffs . . . . .	—	—	—	211

Butchers' Shops

There are 37 butchers' shops in the Borough all of which have been periodically inspected during the year, 178 visits being made.

The high standard of cleanliness and equipment which has for many years characterised this type of food shop, was maintained.

Bakehouses

Twenty-six inspections and visits were made during the year to the five bakehouses, which however, supply only a small proportion of the bread and confectionery sold, the remainder being produced by the large Companies outside the Borough and distributed through food shops and by moibe vans.



Sampling

During the year 78 samples were submitted for chemical analysis and it will be seen from the following summary that a wide range of commodities was covered :—

COMMODITY	NUMBER OF SAMPLES EXAMINED			REPORTED ADULTERATED OR OTHERWISE GIVING RISE TO IRREGULARITY		
	Formal	Informal	Pesticide	Formal	Informal	Pesticide
Beef Pasties . . . . .		1				
Butter . . . . .	1					
Carrots . . . . .		1				
Cherries . . . . .		1				
Cod Fries . . . . .		1				
Christmas Pudding . . . . .		1				
Coffee . . . . .		1				
Cooking Oil . . . . .		1				
Cornish Pasties . . . . .		1				
Cough Formulac . . . . .		2				
Cox's Apples . . . . .		1			1	
Crab and Lobster Paté . . . . .		1				
Crab Spread . . . . .		1				
Cream, Dairy . . . . .		1			1	
Cream Doughnuts . . . . .		1				
Cream Slices . . . . .		1				
Dried Fruit . . . . .		1				
Entero Vioform . . . . .		1				
Faggots . . . . .		1				
Fish Cakes . . . . .		1				
Fruit Gums . . . . .		1				
Ginger Beer Shandy . . . . .		1				
Ice Cream Powder . . . . .	1					
Ice Cream, soft . . . . .		1				
Jellies . . . . .	1					
Loaf . . . . .			1			
Marmalade . . . . .		1				
Marmalade Mix . . . . .		1				
Margarine . . . . .	1					
Meat Pasties . . . . .		1				
Meat Pie . . . . .		2				
Meat Tenderiser . . . . .		1				
Milk, bottled . . . . .	10	10				
Milk, condensed . . . . .		1				
Milk Shake Syrup . . . . .		1				
Mincemeat . . . . .	1					
Orange Squash . . . . .		1				
Pernivit—for chilblains . . . . .		1				
Saccharin tablets . . . . .		1				
Sauce Tartare . . . . .		1				
Sherbits (sweet confection) . . . . .		1				
Sausage . . . . .	7					
Suet . . . . .		1				
Swiss Roll . . . . .		1				
Tea . . . . .		3				
Tomatoes . . . . .		1				
Vinegar . . . . .		2				
Vitavel Syrup . . . . .		1				
Total . . . . .	22	55	1		2	

Of the 78 samples, two were reported as unsatisfactory in relation to labelling irregularities. Details are as follows :—

<i>Sample No. and Description</i>	<i>Irregularity</i>
Real Dairy Cream . . .	This cream was judged to be sterilised cream. It contained
Sample No. 48 (Informal)	19.1% milk fat, being 17% deficient, according to the Food Standards (Cream) Order 1951.

*Action taken* : The findings of the Public Analyst were challenged by the producers. Referred to the Ministry of Agriculture, Fisheries and Food, where Food Standards Committee are currently reviewing the Cream Order 1951.

Cox's Apples . . .	Wrongly labelled. Found to be of "Merton" type evolved
Sample No. 60 (Informal)	from Worcester Pearmain and Cox's Orange Pippin.

*Action taken* : Warning issued as this type of apple had first been put on retail sale in 1966.

## Pesticide Residues in Foodstuffs

In November 1965, the Council agreed to participate in a Scheme which would enable a systematic enquiry to be carried out into the extent of contamination of foodstuffs by toxic chemicals. The County Councils Association, Association of Municipal Corporations and the Urban District Councils Association have drawn up, in conjunction with the Association of Public Analysts, a scheme of sampling which divides the country into seven zones where 2,352 samples of food will be obtained during the period August 1966 to July 1967 and repeated for 1967/68.

Epsom and Ewell falls into Zone 2, which includes the local authorities in the south-east (excluding the Greater London Area) covering a population of approximately 5.9 millions.

The Surrey County Council have agreed to act as liaison authority in Zone 2, and the four samples to be taken by Epsom and Ewell during the period are of Bread, Poultry, Canned Fruit and Onions. The fee per sample has been agreed by the National Joint Council at £6, subject to review at the end of the first year. One sample was taken in 1966, that of bread, on which the Public Analyst gave a satisfactory report.

## Complaints

During the year 52(39) complaints were received in respect of food generally with 8(7) specifically in respect of milk and milk bottles. The figures in brackets are for 1965.

With the exception of those which were of a minor nature, all complaints were reported to the Public Health Committee for their consideration.

Resultant action was that three prosecutions were authorised, details of which are as follows:—

- Case No. 1.* Mouldy pork sausages—Defendants pleaded guilty—were fined £20. 0s. 0d. with £10. 10s. 0d. costs.
- Case No. 2.* Mouldy Steak and Kidney Pie—Defendants pleaded guilty—were fined £20. 0s. 0d. with £7. 7s. 0d. costs.
- Case No. 3.* Minced Beef—contained metal—Defendants pleaded guilty—were fined £15. 0s. 0d. with £5. 5s. 0d. costs.

## Ice Cream

### *Registration*

There are 117 premises registered for the sale and storage of ice cream and of this number one premises is also registered for the manufacture, in accordance with Section 14 of the Food and Drugs Act 1955. With the exception of the one manufacturer, all retailers obtain their supplies from outside the Borough. It should be noted that mobile vans selling ice cream are not registerable.

### *Bacteriological sampling*

During the year 132 samples of ice cream were taken for bacteriological examination. The provisional grading showed the following results :

		<i>Soft</i>	<i>Wrapped</i>
Grade I . . . . .	63	23	40
Grade II . . . . .	21	21	—
Grade III . . . . .	24	19	5
Grade IV . . . . .	24	22	2
	<hr/> 132	<hr/> 85	<hr/> 47

In assessing the bacteriological standard of ice cream, Grade III and IV results are regarded as not having satisfied the test based on the decolouration of methylene blue. It should be emphasised that this standard has no statutory enforcement.

Of the 132 samples, 85 were of soft ice cream. The advent of the ice cream van where ice cream is produced from sterile liquid mix has required a shift in the pattern of sampling. The majority of samples falling within Grades III and IV (48) were of soft ice cream, in spite of constant efforts to advise and instruct on cleansing of equipment in its production in mobile vans. Where the manufacture is so diversified amongst many small traders using only mobile vans I do not expect to see any marked improvement in spite of the fact that the operators commence the process of making the ice cream from a sterile mix.

#### Chemical Sampling

Two samples were submitted to the Public Analyst and found to comply with the required standards.

### SHOPS ACT, 1950

The Council is the authority responsible for the enforcement of the provisions of the Act as they relate to Hours of Closing and Sunday Trading.

The General Closing Hours are 8 o'clock with 9 o'clock on the late day. No Orders as to closing hours or the early closing day have been made by the Local Authority. Wednesday is generally recognised as the early closing day, but the strict observance of this weekday for half-day closing is decreasing and there are signs nationally that would indicate a desire to give greater freedom of choice to the traders.

Inspections and visits relating to shop hours and the posting of notices numbered 559.

### OFFICES, SHOPS AND RAILWAY PREMISES ACT 1963

The following report on work of administration of the Act during the year has been submitted to the Ministry of Labour.

TABLE A  
REGISTRATIONS AND GENERAL INSPECTIONS

<i>Class of Premises</i>	<i>No. premises registered during year</i>	<i>Total No. premises registered end of year</i>	<i>Premises receiving inspection during year</i>
Offices . . . . .	34	198	51
Retail shops . . . . .	24	396	156
Wholesale shops, warehouses . . . . .	2	16	4
Catering establishments open to the public, canteens . . . . .	3	55	14
Fuel storage depots . . . . .	—	—	—
Totals . . . . .	63	665	225

TABLE B  
NUMBER OF VISITS OF ALL KINDS BY INSPECTORS TO REGISTERED PREMISES — 739

TABLE C  
ANALYSIS OF PERSONS EMPLOYED IN REGISTERED PREMISES BY WORKPLACE

<i>Class of Workplace</i>	<i>Number of persons employed</i>
Offices . . . . .	2,882
Retail Shops . . . . .	2,042
Wholesale Departments, Warehouses . . . . .	118
Catering establishments open to the public . . . . .	389
Canteens . . . . .	52
Fuel storage depots . . . . .	15
Total . . . . .	5,498
Total Males . . . . .	2,753
Total Females . . . . .	2,745

TABLE D  
EXEMPTIONS—PART III, SANITARY CONVENIENCES

<i>Class of Premises</i>	<i>No. of Exemptions current, 31/12/66</i>
Offices . . . . .	1



TABLE E  
PROSECUTIONS

<i>Section of Act or Title of Regulation or Order</i>	<i>No. of persons or companies prosecuted</i>	<i>No. of informations laid</i>	<i>No. of informations leading to a conviction</i>
4 (1)	{ 1 }	1	1
6 (4)		1	1
7		1	1
9 (2)		3	3
10 (2)		1	1

The first impetus of this new Act which requires registration of Offices and Shops has now spent itself. New registrations numbered only 63 out of a total of 665 representing those premises where new businesses have been established or changes made during the year. The routine inspections of offices and shops now forms a part of the normal duties of the public health inspectors and, in that respect, 739 inspections were made for all purposes.

Fourteen accidents were reported during the year. Each was investigated and a quarterly return thereon is submitted to the Ministry.

There has been a good and uniform acceptance by those concerned as to the necessity of the requirements of the Act and as shown above only one prosecution was taken during the year. This concerned a ladies' hairdressers where the proprietor was fined £70 with 5 guineas costs in respect of seven offences.

## CLEAN AIR ACT 1956

### Complaints

Twenty-seven complaints were received during the year in connection with smoke nuisances. These were dealt with informally.

### Measurement of Air Pollution

Following the decision of the Council to join the National Scheme organised by the Department of Scientific and Industrial Research, Warren Spring Laboratory, for the measurement of air pollution, the first Station was put into operation in the Science Laboratory of Stoneleigh Secondary School, Vale Road, Ewell, on the 25th June, 1963. The Station is known as Ewell No. 1. A second Station, Epsom No. 1, came into service on the 27th October, 1964, and has been established in the Public Health Department, at the Town Hall, Epsom.

There are few industrial chimneys in this Borough and it is fair to say that most of the smoke now recorded comes from the chimneys of private houses.

In my Annual Report for 1965, I indicated that the information now available from the two local Recording Stations supported the view that smoke and sulphur dioxide were steadily decreasing and this trend has been maintained during this year as seen in the tables accompanying this report.

The Ministry of Housing and Local Government wrote to all local authorities in January 1966, urging those Authorities in "black areas", who so far have done nothing, or very little, to promote clean air by the making of Smoke Control Areas, to review their policies to this end.

The position in the Borough is that the Council have, during the past 5-6 years adopted a policy of publicity designed to encourage householders to burn smokeless fuels and they have never accepted that any part of the district should be classified as a "black area".

The Council informed the Ministry of their views and subsequently were invited to submit a memorandum setting out the reasons with statistical and other information which this Authority consider relevant to the claim that the Borough should not be classified as a "black area".

The statistical information contained in the memorandum, besides being based on the measurements of air pollution, gave information of a survey undertaken in 1961 of 500 houses, being a sample of premises from each Ward. In order that an up-to-date assessment could be made of the present position, a further survey was undertaken in November of this year, but this time was confined to the three Northern Wards of the Borough. This area being adjacent to Greater



London, was suggested by the Ministry as one being appropriate for the establishment of smoke control areas even if the local authority did not introduce a scheme for the whole of the Borough. The details of this Survey are shown in the under-mentioned tables.

The results confirm that the change by householders from the use of bituminous coal to smokeless fuels has been a continuing one during the last five years, and recently it has been greatly accelerated.

It is significant to note that of the 600 houses inspected in these three Wards, only 8.66 per cent. are heated solely by bituminous coal, 13.84 per cent. by a combination of bituminous coal and various smokeless fuels and 77.5 per cent. entirely by smokeless fuels.

The policy in respect of the promotion of Smoke Control Areas is being reviewed nationally and the Council have not yet heard from the Ministry as to their attitude in respect of this matter as it affects the Borough.

**Details of Survey of 600 Houses, November 1966**  
**Cuddington, Ewell Court and Stoneleigh Wards**  
**TABLE I—USE OF FUELS BY HOUSES**

Ward	Number of houses included in Survey	Number of Houses Heated by		
		Bituminous coal	A combination of bituminous coal and various smokeless fuels	Smokeless fuels
Cuddington . . .	214	17	32	165
Ewell Court . . .	254	29	27	198
Stoneleigh . . .	132	6	24	102
Totals . . . . .	600	52	83	465
		8.66%	13.84%	77.5%

**TABLE II—USE OF FUELS BY ROOMS**

Ward	No. of Living Rooms	Coal	Smokeless Fuels					
			Total	Electricity	Gas	Oil	Anthracite	Cokes and Premium Fuels
Cuddington	643	69	574	173	135	12	101	153
Ewell Court	730	80	650	216	169	25	93	147
Stoneleigh	397	37	360	98	136	5	42	79
Totals	1770	186	1584	487	440	42	236	379
		10.51%	89.49%	27.51%	24.86%	2.37%	13.33%	21.42%

EWELL NO. 1

READINGS TAKEN FROM DAILY SMOKE AND SULPHUR DIOXIDE RECORDING APPARATUS AT  
STONELEIGH WEST SECONDARY MODERN SCHOOL, VALE ROAD, STONELEIGH

Smoke Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1963	—	—	—	—	—	—	7	9	33	41	74	174
	1964	155	162	72	29	20	15	14	17	26	94	90	133
	1965	N	105	71	30	17	N	N	16	23	79	93	62
	1966	86	39	54	N	15	—	—	—	—	—	—	—
Highest daily reading	1963	—	—	—	—	—	—	23	39	76	186	290	549
	1964	549	733	227	207	41	47	30	47	252	235	400	524
	1965	367	280	243	79	48	44	34	56	51	226	228	302
	1966	175	104	139	57	32	31	22	43	—	—	—	—
Lowest daily reading	1963	—	—	—	—	—	—	1	1	3	8	8	43
	1964	13	9	13	3	4	5	3	4	3	11	7	11
	1965	10	22	14	9	7	3	4	4	6	10	10	10
	1966	21	10	9	1	3	3	4	3	—	—	—	—

Sulphur Dioxide Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1963	—	—	—	—	—	—	36	30	74	106	190	320
	1964	303	326	225	116	111	81	74	54	77	256	242	274
	1965	N	290	271	109	92	N	N	56	82	220	225	183
	1966	258	213	171	N	93	—	—	—	—	—	—	—
Highest daily reading	1963	—	—	—	—	—	—	89	113	185	314	568	690
	1964	943	938	412	489	191	249	154	133	218	510	983	752
	1965	545	647	562	338	170	333	142	142	194	452	411	470
	1966	407	526	376	214	164	282	104	209	—	—	—	—
Lowest daily reading	1963	—	—	—	—	—	—	3	0	6	19	33	58
	1964	30	112	101	13	41	33	39	23	26	102	63	74
	1965	92	41	42	30	66	129	18	18	35	60	40	44
	1966	58	75	62	36	52	42	40	15	—	—	—	—

N — indicates that insufficient results were obtained

# EPSOM NO. 1

READINGS TAKEN FROM DAILY SMOKE AND SULPHUR DIOXIDE RECORDING APPARATUS AT  
THE TOWN HALL, THE PARADE, EPSOM

## Smoke Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1964	—	—	67	28	18	14	12	15	19	50	53	96
	1965	72	102	52	26	16	20	11	17	18	63	70	48
	1966	74	31	37	28	14							
Highest daily reading	1964	—	—	164	212	39	37	29	46	66	107	276	345
	1965	214	299	184	76	45	113	28	72	37	158	190	193
	1966	148	83	136	75	28	32	27	42				
Lowest daily reading	1964	—	—	15	4	3	4	2	3	3	11	3	11
	1965	7	14	10	6	3	2	4	5	7	10	7	8
	1966	11	3	7	7	4	3	5	3				

## Sulphur Dioxide Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1964	—	—	161	98	83	70	57	54	55	133	178	200
	1965	163	243	138	87	69	137	37	38	41	126	141	88
	1966	170	92	97	102	67							
Highest daily reading	1964	—	—	321	294	191	233	117	101	177	301	886	538
	1965	355	562	319	255	213	298	73	74	101	266	331	237
	1966	402	237	205	198	134	137	54	110				
Lowest daily reading	1964	—	—	66	49	26	26	32	20	26	45	38	25
	1965	32	82	29	42	27	48	12	12	20	39	41	24
	1966	46	24	37	45	24	12	18	18				



## EPSOM DOWNS

### Sale of Food

The sale of food is mainly associated with the four Race Meetings, where the Spring and Summer events attract the majority of food traders. Special arrangements are made in respect of piped water supplies and sanitary accommodation ; facilities for heating water are provided in the mobile refreshment vans and tents, and the traders are encouraged to use the wire enclosures for the disposal of litter and rubbish. Constant inspection is maintained and a good standard of hygiene is achieved, bearing in mind the difficulties of catering out-of-doors.

Samples of water, ice cream and other foodstuffs are taken during Race Meetings and throughout the summer.

### Temporary Sanitary Accommodation

This provision is for the periods covered by the four Race Meetings. The Corporation provides and staffs the five mobile conveniences which are connected to the sewers and have a piped water supply. The Epsom Grand Stand Association Ltd. augment the accommodation by the erection of tent lavatories furnished with Elsan Closets.

### Permanent Sanitary Accommodation

Provision was made in the estimates for this long awaited building, but although the work was not started by the end of the year, it is hoped to see it commenced in the financial year 1967 to 1968.

### Cleansing

The cleansing of the Downs during and after Race Meetings is carried out under the direction of the Epsom Grand Stand Association Limited. Of recent years there has been a marked improvement in this service and the work is completed more quickly after the Meetings.

At other times the cleansing of the Downs is the responsibility of the Conservators.

## LAND AT THE REAR OF CHESSINGTON ROAD AND COX LANE, WEST EWELL

The clearance of rubbish, old iron, etc., from the land and the cessation of activities connected with car breaking, pig keeping and the stabling of ponies was achieved during the year. Good progress was made in the laying out of the site which includes provision for drainage disposal facilities, piped water supplies and roadways in preparation for the re-siting of the caravans, which number had reduced to approximately 60 by the end of the year.

## RODENT CONTROL

### Prevention of Damage by Pests Act 1949

In accordance with requirements of the above Act, occupiers of land or buildings are under an obligation to notify the Local Authority in writing, of the presence of rats or mice in substantial numbers. It is also the duty of every Local Authority to take such steps as may be necessary to secure, as far as practicable, that their district is kept free from rats and mice. They are empowered to make inspections and enforce owners and occupiers to carry out such operations as may be necessary for this purpose.

Advice and assistance are given to persons who report any such infestation or apply for information as to preventive measures. Such advice is based on methods of destruction recommended by the Infestation Control Division of the Ministry of Agriculture, Fisheries and Food.

One full-time Rodent Operative is employed in the Department and the following is a summary of the work carried out :—

<i>Number of</i>	1964	1965	1966
Complaints investigated . . . . .	566	543	736
Inspections and Visits . . . . .	4,411	4,339	4,345
Premises found infested . . . . .	627	526	562
Treatments carried out by the Rodent Operative at:			
Private Premises . . . . .	594	607	662
Business Premises . . . . .	133	130	109
Rats known to have been caught and destroyed by the Rodent Operative . . . . .	564	464	401

### Sewer Rat Control

The treatment of sewers was continued during the year in accordance with the requirements of the Ministry of Agriculture, Fisheries and Food. The work is carried out by the Rodent Operative with the assistance of sewermen from the Borough Engineer's Department.



For the purpose of treatment, the Borough is divided into 13 Sections and sewer manholes in seven Sections were test baited followed by poisoning any manholes where evidence of infestation was found.

The results of this work were as follows :—

Number of manholes tested . . . . .	125
Number of manholes tested—"takes" . . . . .	17

The 17 manholes showing "takes" were rebaited plus a further 3 which were adjacent. Of the 20 manholes so treated, 6 complete and 5 partial takes were recorded.

Results over the past few years show that there is a steadily reducing rat population in the sewers principally due to these control methods.

**DISINFECTION**

**Clothing**

In order to assist Nationals of Spain, Italy, East Germany and other Central European Countries to comply with Postal and Customs Regulations concerning the transit of clean, second-hand clothing, disinfection was carried out in respect of 204 items of clothing arising from 14 applications.

**Library Books**

The disinfection of library books as a result of contact with infectious disease, is carried out as a routine measure. Details of work done are as follows :

Reference from Borrowers—15 Requests . . . . .	58 books
Reference from Schools—One Request . . . . .	37 books and 14 pictures
Reference from S.C.C.—Travelling Library Section .	270 books

**INSECT AND OTHER PESTS**

There has been a change in recent years in the type of house infestation coming to the notice of the Department. Complaints as to moths, furniture beetles and carpet beetles have fallen sharply and the main household pest now appears to be the garden ant.

The cockroach, beetle and Pharaoh's ant are the insect pests most commonly found in institutions, hospitals, bakehouses, etc., where disinfection treatment is carried out usually by private Companies under contract.

**Mosquito Control**

The ponds and pools on Epsom Common and in other parts of the Borough were sprayed as in previous years, which control measure helps to reduce nuisance from mosquitoes.

**Destruction of Wasps' Nests**

This service is carried out on request at a charge of 5s. per nest destroyed (no extra charge for additional nests treated at the time of visit).

During the year 119 nests were so treated in comparison with 347 in 1965, and the receipts amounted to £24. 15s. 0d.

**Feral Pigeons—Control**

In 1965 a modest start was made in the trapping of Feral Pigeons which infest the public places in the Borough. The number of birds trapped in 1966 was 77 ; additionally, 34 were taken by hand from nesting sites with 12 eggs destroyed.

Although the figures for this year are slightly lower than for 1965, it is not always possible to maintain or increase the extent of this work owing to the chance nature of the operation and the limiting factor of time that can be allowed therefore.

All pigeons so taken are humanely killed and the bodies cremated.

**MORTUARY**

The use of the Council's Mortuary for post-mortem purposes ceased in 1964, and until the new joint accommodation is ready at the Epsom District Hospital, the Board have agreed to undertake this work. The charge made for the service is £2. 2s. 0d. per body, and the cost for 1966 was £226. 16s. 0d.

The building scheme to provide modern mortuary facilities at the Epsom District Hospital which is a joint venture by this Council and other Local Authorities and the South West Metropolitan Regional Hospital Board, is due to start in the near future and until this scheme is in operation, the Epsom Mortuary will be maintained for mortuary purposes only.

## HAIRDRESSERS' AND BARBERS' ESTABLISHMENTS

The Hairdressers (Registration) Act 1964, recently came into force being an Act to provide for the registration of hairdressers and for purposes included therewith. It enables a hairdresser to use the title "State Registered Hairdresser" and the National Federation of Hairdressers believes that such registration will result in higher standards throughout the Trade. In the main, it deals with qualifications, the setting up of a Hairdressing Council and the promotion of Courses and Examinations in Hairdressing, but the measure is one which calls only for voluntary control within the Trade and registration is not compulsory on all hairdressers.

The Council considered that it would be appropriate with the introduction of this new Act to adopt Byelaws in relation to hairdressers' and barbers' establishments for the purpose of securing :—

- (a) the cleanliness of premises on which a hairdresser's or barber's business is carried on and of the instruments, towels, materials and equipment used therein ; and
- (b) the cleanliness of the hairdressers or barbers working in such premises in regard to both themselves and their clothing.

Approval of the Ministry of Housing and Local Government was obtained and the Byelaws came into force on the 1st July 1966. Copies were distributed to the trade and by the end of the year 47 visits were made in connection therewith, and five informal notices served.

## MISCELLANEOUS

### Pet Animals Act 1951

This Act provides that no persons shall keep a pet shop except under licence granted by the local authority in accordance with the provisions of the Act and on payment of a fee not exceeding ten shillings. Three applications were received and licences granted in 1966.

### Animal Boarding Establishments Act 1963

This Act makes provision for a system of licensing and inspection by the local authority of any establishment at which a business of providing accommodation for cats or dogs is carried on.

Three licences were issued during the year.

### Riding Establishments Act 1964

This new Act which came into force on the 1st April, 1965, repealing the Act of 1939, provides for a system of yearly licensing and inspection by local authorities of riding establishments.

Briefly, in considering the application for a licence, a local authority must have regard to the suitability and qualification of the applicant and a report from a Veterinary Surgeon or Veterinary Practitioner of an inspection of the premises. The suitability of the horses kept at any such establishment is also a determining factor.

The Council re-appointed their Veterinary Surgeon (first appointed under the Act of 1939) and five riding establishments were licensed during the year.

### Betting, Gaming and Lotteries Acts 1963-64

The Council reviewed their policy in respect of the granting of permits for the provision of amusements with prizes to now include licensed premises, with the stipulation that only one amusement machine was permitted in such premises.

Thirteen applications for permits for the provision of amusements with prizes were made. Twelve were granted as follows :

Public Houses	.	.	.	.	.	.	8
Cafes	.	.	.	.	.	.	3
Cinemas	.	.	.	.	.	.	1

The one application refused related to a cafe in Epsom and the applicant appealed to Quarter Sessions against the decision of the local authority. The appeal was dismissed.

At the end of the year 16 permits were in force as follows :

Public Houses	.	.	.	.	.	.	8
Cafes	.	.	.	.	.	.	7
Cinemas	.	.	.	.	.	.	1

### Consumer Protection Act 1963

#### *Children's Nightdresses—Safety from Fire*

The Children's Nightdresses Regulations 1964 makes provision for all nightdresses coming within the scope of the Regulations to be made of a fabric which conforms to the low flammability requirements of British Standard 3121:1959, and where fabrics have been chemically treated to make them flame-resistant, cautionary labels against washing with soap must be attached.

Inspections of shops (9) have shown that stock held complied with the Regulations.

### *Fire Guards—Heating Appliances*

Regulations in force under this Act require that fireguards to gas fires, electric fires and oil heaters shall be robustly made and comply with certain specified standards of construction and fitting.

### *Oil Heaters—Construction*

The Oil Heaters Regulations 1962 as amended by the Oil Heaters Regulations 1966 prescribe standards of construction, design and performance, based on British Standard 3300:1963, and to the knowledge of the Home Office, all oil heaters at present manufactured in this country are being made to this standard. The effect of the 1966 Regulations is to make further provision for the safety in use of these heating appliances.

No complaints were received in respect of either of these Regulations and the 35 inspections of appliances for sale did not reveal any infringements.

### **Noise Abatement Act 1960**

Eight complaints were received, all being dealt with informally.

### **Rag, Flock and Other Filling Materials Act 1951**

There are no premises in the Borough which are subject to registration under the provisions of this Act, and no samples of rag flock or other fillings were taken during the year.

### **Scrap Metal Dealers Act 1964**

This Act makes new provision for the local registration of all scrap metal dealers and every local authority is required to maintain a register of persons carrying on business in their area as scrap metal dealers.

There is no discretion to refuse registration, which can be effective for three years, and will be cancelled unless application is received for its renewal.

Apart from the registration by the local authority the dealer is required to keep a record of his dealings in scrap metal and this record is subject to scrutiny by the Police.

The Act came into force on 1st April, 1965. One application was made and granted during the year, making a total of 22 premises so registered.

**PART FOUR**

**SCHOOL  
HEALTH  
SERVICE**



# THE JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION

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# BOROUGH OF EPSOM AND EWELL

## EDUCATION COMMITTEE

### Report of the School Medical Officer for the Year 1966

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present my second report as School Medical Officer since the Epsom and Ewell Education (Divisional Administration) Scheme came into operation on 1st April, 1965.

The number of pupils coming within the scope of the School Health Service was 8,285. The health of the children was well maintained. There is little to report under infectious disease except for an outbreak of Sonne Dysentery which affected the two Ewell Village Primary Schools in November. Again the absence of poliomyelitis in the Borough proves the efficacy of the oral vaccine which is generally accepted. Defective vision, posture and hearing were again commonly found. There is no doubt that the provision of School meals and milk is a significant factor in contributing to the sound nutrition of the School child. The uptake of meals was over 80 per cent. and that of milk well over 90 per cent. in the primary schools with an expected falling away to 57 per cent. in adolescents.

No difficulty has been met in placing handicapped children in Special Schools. If a suitable placement cannot be found for the pupil with multiple handicaps he may be provided with a home tutor. The number (316) of handicapped pupils ascertained in need of special educational treatment was 3.8 per cent. of the school population and half of these had speech defects and 53 were educationally sub-normal. Special Schools at West Hill, Leatherhead and St. Phillip's, Chessington are provided for such sub-normal children.

At the end of the year, of the handicapped pupils half (159) had speech defects, 36 of these completed their speech training during the year and were deemed improved or cured. The number of hard of hearing pupils was 17, of these, 10 attended special schools and 7 were in ordinary schools under medical supervision. 17 pupils were provided with hearing aids. The close integration of the audiology and speech therapy services under the direction of Dr. E. A. Beet, the County Audiologist, was continued with good results. The scope of the peripatetic teacher's activities included work at the partially hearing Unit at Riverview School, Ewell, in the homes of deaf children and with deaf pupils in ordinary Schools.

My thanks are due to Members of the Education Committee for their encouragement and support. The co-operation of the School Heads and of their Staffs has made the administration of the School Health Service rewarding. I should like to pay tribute to the loyalty of the medical and nursing staffs in carrying out their field work. Great credit is due to Mr. R. A. Stay, my Administrative Assistant, and to his clerical staff for their hard work in maintaining the service and for their preparation of the statistical Tables in this Report.

I am, Mr. Chairman, Ladies and Gentlemen, Your obedient Servant,

*PATRICK H. R. ANDERSON*  
*School Medical Officer*

## School Population

The maintained school population at the end of the year was as follows :

Primary . . . . .	4,524
Secondary . . . . .	3,668
Special . . . . .	21
Nursery . . . . .	72
	<hr/>
	8,285

The number of maintained school departments in the Borough on 31st December, 1966, was :—

Primary . . . . .	19
Secondary . . . . .	6
Special (Partially Hearing Unit and The Lindens, St. Ebba's Hospital) . . . . .	2
Nursery Classes (West Ewell and Cuddington Croft Schools) . . . . .	2
	<hr/>
	29

## Routine Medical Inspection

Routine medical inspection by age groups is carried out as follows :—

<i>Primary</i>	(i) On entry . . . . .	Complete medical examination
	(ii) During year in which age of 8 is reached	Eye and hearing test only
<i>Secondary</i>	(iii) On entry . . . . .	Complete medical examination
	(iv) During year in which age of 13 is reached (if more than a year since last routine examination)	Eye test only
	(v) During year in which age of 15 is reached	Complete medical examination
	(vi) During year in which age 17 is reached (if more than a year since last routine inspection)	Eye test only

## General Physical Condition

At each routine medical inspection School Medical Officers are required to assess the general physical condition of the children and to record the assessment under the headings "satisfactory" or "unsatisfactory".

With one exception the condition of the children was recorded as satisfactory.

## Cleanliness Inspections

During the year 1,617 individual examinations of pupils were carried out by Health Visitors. Fifteen pupils were found to have nits in the hair.

Materials to treat the verminous condition were supplied to the parents concerned.

## Defects found at Routine Medical Inspections

Number of pupils examined . . . . .	3,568
Number of pupils found to require treatment . . . . .	528
Percentage of pupils in need of treatment . . . . .	14.8
Number of defects requiring observation . . . . .	1,190
Number of defects requiring treatment . . . . .	559

## Parents present at Inspections

Parents were present at 960 routine medical inspections, a percentage of 26.9.

## DENTAL INSPECTION AND TREATMENT

REPORT OF MR. G. B. ASHWORTH, F.D.S., SENIOR DENTAL OFFICER

### Report on the Dental Services within the Borough of Epsom and Ewell for the year 1966

The Dental Clinics at Epsom and Ewell have been fully staffed during the year. General Anaesthetic sessions for extraction cases have been held regularly, usually at weekly intervals, alternating either at one or the other Clinic. Orthodontic sessions, in the charge of a County Specialist, have been continued at both Clinics. The services provided were available to all school children, to expectant and nursing mothers and to pre-school children.

## The School Dental Service

The children inspected at the Schools within the Borough numbered 6,716. In addition, 1,001 inspections were carried out at the clinics for children who attended voluntarily for a more detailed examination. (This was a considerable increase over similar inspections of the previous year and proved to be a most worthwhile preventive service.) Some 1,666 individual children received treatment during the year, these included children attending special schools for the Mentally Retarded in the district and also at the School for Autistic children at The Lindens, Epsom.

The following is a summary of some of the treatment provided :—

Number of fillings in permanent teeth . . . .	2,625
Number of fillings in temporary teeth . . . .	1,237
Number of permanent teeth extracted . . . .	195
Number of temporary teeth extracted . . . .	492
Number of children receiving orthodontic treatment	268

## Employment of Children

(a) School Medical Officers carried out 108 examinations of children in order to ascertain their fitness to undertake part-time employment. All were found to be fit.

(b) Two children were examined in connection with applications for Licences to take part in stage entertainment and both were found to be fit.

## Child Guidance

Included in the accommodation in the new Health Clinic in Church Street is a suite of five rooms set aside as a Child Guidance Clinic open daily. The team of specialist officers consists of a Psychiatrist, an Educational Psychologist, two Psychiatric Social Workers and two Therapists. Any pupil, whether attending a maintained or independent School, may attend at this Clinic. As the catchment area extends beyond the Epsom and Ewell Borough the general administration of the Child Guidance Service is controlled by the County Medical Officer.

At the end of the year, 22 maladjusted pupils were attending and six had been recommended and accepted for Special Schools.

## Clayhill Remedial Centre, West Hill, Epsom

Children who are referred to this Centre by the Educational Psychologist are pupils who, by reason of illness, frequent changes in schooling or lack of emotional security in the home, are failing to make satisfactory progress in the basic skills in their primary schools. The head teacher refers such a pupil to the Psychologist who assesses the child's capacity to benefit from remedial education. A consultation then follows between the Psychologist, Teacher-in-charge of the Centre and the parents. Once selected, arrangements are made for the pupil to receive tuition on four half-days a week. Before he can keep pace with the ordinary school curriculum, he may have to attend for a period of anything from one Term to up 2½ years. At the Centre a staff of three Teachers specially trained and employing ingenious and original aids deal with a Roll of 40. Of these, 22 come from 11 Schools within the Borough.

## Speech Therapy

Three Speech Therapists are employed on a part-time basis at the Ewell Court and Epsom Clinics. The general administration of this service is also controlled by the County Medical Officer.

Details of the work carried out by Speech Therapists during the year are given below. Six pupils were on the waiting list at the end of the year.

	<i>Epsom</i>	<i>Ewell</i>
Number of treatment sessions . . . . .	185	176
Number of consultation sessions with parents and teachers .	8	4
Number of children treated during the year . . . . .	74	79
Number of children discharged during the year :—		
(a) Cured . . . . .	21	17
(b) Improved . . . . .	5	8
(c) Other reasons . . . . .	10	11
Number under treatment at end of year . . . . .	42	45
Number awaiting treatment at 31st December, 1966 . . .	4	2



## Day School for Autistic Children, The Lindens, St. Ebba's Hospital, Epsom

Probably four or five children out of every 10,000 are autistic—rather more than are blind. It is only in the last ten years that autism has been recognised as a separate condition. Formerly these grossly mal-adjusted children were labelled sub-normal, deaf or ineducable. During the year, Surrey County Council opened this special Unit for the Autistic child. This Unit is in charge of a Consultant Psychiatrist, is staffed by specially trained Teachers and School Helpers and is basically a Day School. These children, though of normal intelligence, are completely shut off from a world of people because of their failure to communicate through the medium of speech. Treatment aims to lure them back to a normal life. Success depends on the personality of the Teacher who, one day, through an uncommon degree of understanding, patience and optimism finds the *key* which unlocks the child who is now able to take his rightful place in our society and in the Primary School. Of the 23 children on the Roll during the year one pupil's home was in the Borough.

## Convalescent Homes

Any delicate child who attends a school maintained by the Local Education Authority may be provided with convalescent home treatment, free of charge. Such treatment may be recommended for periods up to 4 weeks.

During 1966 seven school children were sent for convalescent holidays by the Council.

## School Eye Clinics

Ophthalmic Surgeons visited the Ewell Court and Epsom Clinics regularly throughout the year and below is given a summary of work carried out :

Number of sessions . . . . .	68
Number of children who attended during the year . . . . .	671
Number of attendances during the year . . . . .	937
Number of examinations for errors of refraction (including squint):—	
(a) Glasses ordered or re-ordered . . . . .	240
(b) Glasses not ordered . . . . .	676
Number referred for orthoptic or surgical treatment of squint . . . . .	8
Number referred to Hospital for treatment unobtainable at Clinic . . . . .	5

## Postural Defects

A qualified Physiotherapist attended at the two main Clinics to conduct remedial exercises classes for children with orthopaedic defects relating to posture and feet.

Number of sessions . . . . .	117
Number of children treated in 1966 . . . . .	141
Number of attendances . . . . .	713
Number of new cases admitted during the year . . . . .	82
Number of cases discharged . . . . .	62

## Bedwetting

In the course of the year seven children were loaned electric enuresis alarms, with varying degrees of success.

## Early Diagnosis and Treatment of the Deaf Child

The aim of the Health Visitors and School Medical Officers is to ascertain all young deaf children and make plans for their special treatment before they enter School at the age of 5 years.

To ensure that no deaf children have been missed, all pupils aged 6-7 years are given a routine pure-tone audiometer test in School. In 1966, 694 pupils were so tested and of these 46 (or 6.6 per cent.) showed significant hearing defect. (See Table VI.)

At the end of the year the ascertained hard of hearing children were :

*Under 5 years of age*

At Special Schools :—

Partially deaf . . . . .	Nil
Totally deaf . . . . .	1

Over 5 years of age

(a) At Special Schools :—

Partially deaf . . . . .	7
Totally deaf . . . . .	2

(b) In ordinary Schools and under supervision by Medical Officers and Teachers of the deaf . . . . . 7

*Hearing Aid Provided*

In age groups—0-5 . . . . .	1
5 and over . . . . .	16

## Infectious Disease

### Sonne Dysentery affecting pupils attending Ewell Primary Schools

An outbreak of Sonne Dysentery affecting 49 families with children attending these Schools, and all those affected were excluded. This infection is borne through dust, from clothes, through contaminated skin, or in certain circumstances carried by food.

I did not recommend School closure as a means to control the spread of dysentery because closure may lead to a spread of the infection to neighbouring areas, through children playing together, house visiting and other communal activities. The surest way of controlling such an outbreak is the introduction of strict hygiene measures. A closely supervised hand-rinsing regime with a potent disinfectant was put into operation in the Schools and maintained for a period of four weeks. The hand-rinsing was carried out by the children as a parade four times a day. The hands were dried in a paper towel, one for each child, and in addition each child washed his hands with soap and water after using the lavatory and rinsed them in disinfectant on returning to the Class. Special measures were taken to ensure the repeated thorough cleansing and disinfecting of all handles of all doors in the Schools, the seats and chains in all lavatories and the tap handles in all wash-basins.

Family Doctors were kept informed of these precautions and convalescent children were re-admitted to School when the Family Doctor considered them fit. The illness was of comparatively short duration lasting not more than a few days.

### Protection against Tuberculosis

With the active co-operation of Head Teachers, the scheme was continued for the protection of school-leavers (age groups 13-14) by inoculation with B.C.G. vaccine : 74.2 per cent. of parents gave their consent and 507 children were inoculated. In addition 24 older pupils were inoculated in 1966.

### School Meals and Milk

The following is a summary showing the number of children taking meals and milk on a day in September, 1966 :—

Category	Total No. in Attendance	MEALS			MILK	
		Free	Full Cost	% of total taking meals	No. taking milk	% of total taking milk
Infant	1699	31	1338	80.5	1663	97.8
Junior	2502	52	2094	85.7	2362	94.4
Secondary	3547	49	2867	82.2	2019	56.9
Totals	7748	132	6299	83.0	6044	78.0

### Death of School Child

Death of child of school age during the year was as follows :

Boy aged 5 years—acute inflammation of epiglottis (throat).

### Handicapped Pupils

Table III sets out by categories the handicapped pupils ascertained as at 31st December, 1966, and shows what provision was made for their special educational treatment.

TABLE I

## A. Periodic Medical Inspections

Age Groups Inspected (by years of birth)	Number of Pupils Inspected	Pupils Found to Require Treatment		
		For defective vision (excluding squint)	For any other condition recorded on Table II	Total individual pupils
1962 and later . . .	43	—	8	6
1961 . . . . .	596	14	46	50
1960 . . . . .	164	3	21	18
1959 . . . . .	31	1	1	2
1958 . . . . .	625	57	—	57
1957 . . . . .	9	—	—	—
1956 . . . . .	9	1	1	2
1955 . . . . .	354	51	14	62
1954 . . . . .	231	35	7	42
1953 . . . . .	625	97	2	98
1952 . . . . .	115	14	1	15
1951 and earlier . .	766	164	13	176
Totals . . . . .	3,568	437	114	528

## B. Other Inspections

## Notes

A special inspection is one that is carried out at the request of a parent, doctor, nurse, teacher or other person.

A re-inspection is a follow-up inspection arising from one periodic medical inspection or out of a special inspection.

Number of special inspections . . . . .	905
Number of re-inspections . . . . .	504
Total . . . . .	<u>1,409</u>

## C. Infestation with Vermin

- (i) Number of individual examinations of pupils in Schools by Health Visitors 1,617
- (ii) Number of individual pupils found to be infested . . . . . 15
- (iii) Number of individual pupils in respect of whom cleansing notices were issued . . . . . Nil

TABLE II

## A. Return of Defects found in the Course of Medical Inspection in 1966

<i>Defect or Disease</i>	<i>Periodic Inspections</i>		<i>Special Inspections</i>	
	<i>Requiring treatment</i>	<i>Requiring to be kept under observation</i>	<i>Requiring treatment</i>	<i>Requiring to be kept under observation</i>
Skin . . . . .	3	85	—	—
Eyes :—				
(a) Vision . . . . .	437	281	200	346
(b) Squint . . . . .	7	9	—	—
(c) Other . . . . .	1	30	—	—
Ears :—				
(a) Hearing . . . . .	7	19	34	44
(b) Otitis media . . . . .	—	21	—	—
(c) Other . . . . .	1	35	3	1
Nose and Throat . . . . .	2	80	4	1
Speech . . . . .	14	23	59	2
Cervical Glands . . . . .	—	68	—	—
Heart and Circulation . . . . .	—	19	—	—
Lungs :				
(a) Pulmonary tuberculosis (definite)	—	—	—	—
(b) Other lung diseases . . . . .	3	59	5	4
Development :				
(a) Hernia . . . . .	3	27	—	—
(b) Other . . . . .	7	70	—	—
Nervous System :				
(a) Epilepsy . . . . .	1	3	—	—
(b) Other conditions . . . . .	2	51	—	3
Orthopaedic :				
(a) Posture . . . . .	18	54	—	10
(b) Foot defects . . . . .	26	80	4	11
(c) Other . . . . .	22	85	2	3
Psychological :				
(a) Development . . . . .	3	2	11	9
(b) Stability . . . . .	1	35	18	2
Other Diseases . . . . .	1	54	3	2
Totals . . . . .	559	1,190	343	438



TABLE III

Handicapped Pupils as Ascertained at 31st December, 1966

<i>Category</i>	<i>At ordinary school under medical supervision</i>	<i>At special school or Hospital School</i>	<i>Attending Speech Clinic</i>	<i>Attending Child Guidance Clinic</i>	<i>At ordinary school—on waiting list for special school</i>	<i>Home teaching provided</i>	<i>Under school age and under medical supervision</i>	<i>At ordinary school—on waiting list for Speech and Child Guidance Clinics</i>	<i>At home awaiting admission to special school</i>	<i>Total</i>
Blind and partially sighted .	—	1	—	—	—	—	2	—	—	3
Deaf and partially deaf .	7	11	—	—	—	—	—	—	—	18
Delicate . . . . .	2	6	—	—	3	—	1	—	—	12
Physically handicapped .	19	12	—	—	1	2	4	—	—	38
Educationally sub-normal .	17	31	—	—	—	—	3	—	2	53
Epileptic . . . . .	4	1	—	—	—	—	—	—	—	5
Maladjusted . . . . .	—	6	—	22	—	—	—	—	—	28
Speech . . . . .	—	—	152	—	1	—	—	6	—	159
Totals . . . . .	49	68	152	22	5	2	10	6	2	316

TABLE IV

## Treatment of Pupils attending Maintained Primary and Secondary Schools

## (a) Diseases of the Skin

	<i>Number of cases treated or under treatment during year</i>
Ringworm—(i) Scalp . . . . .	—
(ii) Body . . . . .	—
Scabies . . . . .	—
Impetigo . . . . .	2
Other skin diseases . . . . .	1
Total . . . . .	3

## (b) Eye Diseases, Defective Vision and Squint

	<i>Number of cases dealt with</i>
External and other, excluding errors of refraction and squint	6
Errors of refraction (including squint) . . . . .	916
Total . . . . .	922
Number of pupils for whom spectacles were prescribed . . .	240

## (c) Diseases and Defects of Ear, Nose and Throat

	<i>Number of cases treated</i>
Received operative treatment for adenoids and chronic tonsillitis	14
Received other forms of treatment . . . . .	6
Total . . . . .	20

## (d) Orthopaedic and Postural Defects

	<i>Number known to have been treated</i>
(a) Pupils treated at Clinics or Out-Patient Departments . .	141
(b) Pupils treated at School for postural defects . . . . .	35
Total . . . . .	176

## (e) Other treatment given

	<i>Number of cases treated in 1966</i>
Cervical Glands . . . . .	—
Heart and circulation . . . . .	—
Lungs . . . . .	18
Development :—(a) Hernia . . . . .	1
(b) Other . . . . .	4
Nervous :—(a) Epilepsy . . . . .	10
(b) Other . . . . .	2
Miscellaneous Minor Ailments. . . . .	33
Total . . . . .	68

**TABLE V**  
**Dental Inspection and Treatment**

1. Number of pupils inspected . . . . .	7,717
2. Number found to require treatment . . . . .	2,786
3. Number treated at school dental clinics . . . . .	1,666
4. Number of attendances made by pupils for treatment . . . . .	5,167
5. Number of half-days devoted to inspections . . . . .	75
6. Number of half-days devoted to treatment . . . . .	842
7. Number of permanent teeth extracted . . . . .	195
8. Number of permanent teeth filled . . . . .	2,043
9. Number of temporary teeth extracted . . . . .	492
10. Number of temporary teeth filled . . . . .	1,126
11. Total number of teeth filled . . . . .	3,169
12. Number of administrations of general anaesthetics . . . . .	364
13. Number of pupils X-rayed . . . . .	87
14. Number of sealings and gum treatments . . . . .	112
15. Number of teeth conserved with silver nitrate . . . . .	64
16. Number of teeth root filled . . . . .	5
17. Courses of treatment completed . . . . .	1,139
18. Orthodontics :	
Cases remaining from previous year . . . . .	214
New cases commenced during year . . . . .	54
Cases completed during year . . . . .	35
Cases discontinued during year . . . . .	5
Number of removable appliances fitted . . . . .	119
Number of fixed appliances fitted . . . . .	2
Pupils referred to hospital consultant . . . . .	3
19. Prosthetics :—	
Number of pupils supplied with full upper or full lower denture . . . . .	—
Number of pupils supplied with partial denture . . . . .	1

**TABLE VI**  
**Audiometry**

	<i>Routine Examinations</i>	<i>Retests and Specials</i>	<i>Total</i>
(1) Number of children tested . . . . .	694	180	874
(2) Number of children who failed test . . . . .	46	31	77
(3) Result of investigations by School Medical Officers :—			
(a) No significant hearing loss . . . . .	22	14	36
(b) No significant hearing loss but child appears to be mentally retarded	1	1	2
Deafness due to :—			
(c) catarrhal conditions . . . . .	11	5	16
(d) old otitis media . . . . .	1	4	5
(e) injury . . . . .	—	—	—
(f) other cause . . . . .	4	1	5
(g) undetermined causes . . . . .	1	1	2
(h) untraced or left the district . . . . .	1	2	3
(i) already supplied with hearing aids . . . . .	—	—	—
(j) investigations remaining to be carried out	5	3	8
	46	31	77
(4) Recommendations :—			
(a) No action required . . . . .	17	10	27
(b) For observation only . . . . .	9	8	17
(c) Referred to Audiology Clinic . . . . .	4	3	7
(d) Referred to General Practitioner . . . . .	2	2	4
(e) Referred to Ear, Nose and Throat Consultant	6	4	10
(f) Special position in Class . . . . .	8	3	11
(g) Hearing Aid and supervision by Teacher of Deaf	—	—	—

TABLE VII

## Notification of Communicable Diseases by Head Teachers during 1966

(a) *Infectious Diseases*

<i>Disease</i>	<i>Suffering</i>	<i>Excluded on Suspicion</i>	<i>Infection at Home</i>	<i>Total Exclusions</i>
Smallpox . . . . .	—	—	—	—
Diphtheria . . . . .	—	—	—	—
Scarlet Fever . . . . .	13	—	3	16
Enteric Fever . . . . .	—	—	—	—
Measles . . . . .	32	—	2	34
Whooping Cough . . . . .	1	—	—	1
German Measles . . . . .	6	1	—	7
Chickenpox . . . . .	68	—	1	69
Mumps . . . . .	145	—	—	145
Jaundice . . . . .	—	—	—	—
Other . . . . .	68	47	—	115
Totals . . . . .	333	48	6	387

(b) *Contagious Diseases*

<i>Disease</i>	<i>Suffering</i>	<i>Excluded on Suspicion</i>	<i>Total Exclusions</i>
Ringworm . . . . .	—	—	—
Impetigo . . . . .	2	—	2
Scabies . . . . .	—	—	—
Other . . . . .	5	—	5
Totals . . . . .	7	—	7



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